State of New Mexico

District I

Form C-101

District I 1625 N. French Dr., Hobbs, NM 88240 District II 811 South First, Artesia, NM 88210 District III

1000 Rio Brazos Rd., Aztec, NM 87410

2040 South Pacheco, Santa Fe, NM 87505

District IV

State of New Mexico Energy, Minerals & Natural Resources Department

Form C-102 Revised October 18, 1994 Instructions on back

Submit to Appropriate District Office State Lease – 4 Copies

Fee Lease - 3 Copies

OIL CONSERVATION DIVISION 2040 South Pacheco Santa Fe, NM 87505

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT wildest

| API Number | | Pool Gode | | Wileca I | | P | ool Name | | | |
|--------------------|--------------|---------------|--------|-------------|--------|-------------|----------|----------|--------|------|
| 30-021-20493 96010 | | | BRAVO | DOM. | 1E CAF | RBON | DIO. | XIDE GAS | 640 | |
| Property Code | | Property Name | | | | Well Nu | ımber | | | |
| 27111 | BRAVC | DOME (| CARBON | DIOXIDE | GAS | UNIT | 2129 | | 161 | 1 |
| OGRID No. | | | Оре | erator Name | | | | | Elevat | tion |
| 16696 | OXY USA INC. | | | | 549 | 1.8 | | | | |
| | | | ~ . | | | | | | | |

Surface Location

| UL or lot no. | Section | Township | Range | Lot Idn. | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|----------|---------------|------------------|---------------|----------------|---------|
| G | 16 | 21 N | 29 E | | 1700' | NORTH | 1700' | EAST | HARDING |

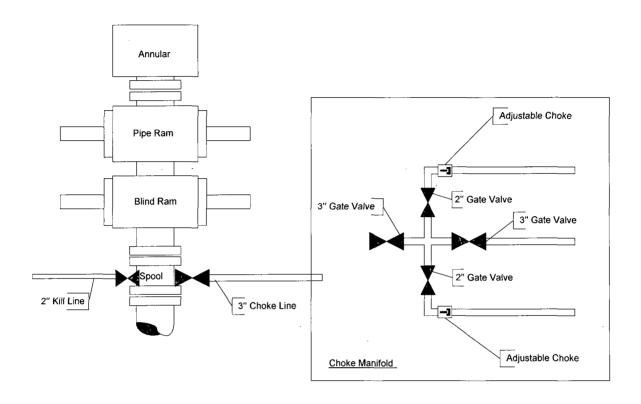
Bottom Hole Location If Different From Surface

| ſ | UL or lot no. | Section | Township | Range | Lot Idn. | Feet from the | North/South line | Feet from the | East/West line | County |
|---|----------------|---------|-------------|---------------|----------|---------------|------------------|---------------|----------------|-------------|
| | | | | | | | | ļ | | |
| t | Dedicated Acre | s Joint | or Infill (| Consolidation | Code C | order No. | | <u> </u> | <u> </u> | |
| | 640/11ES | . ~ |) | | | | | | | |

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN, APPROVED BY THE DIVISION

| 16 | | | OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief. |
|----|---|----------------|--|
| | NM-E NAD27 Lat - 36° 03'07.42" Lon - 103° 51'12.46" X - 64'1849.88 | 1700' | Signature David Stewart Printed Name Sr. Regulatory Analyst Title |
| | Y - 1838525.96 | | 7 29 (08) Date |
| | | | SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief. Date of Survey Signature and Seal of Professional Surveyor |
| | | | Certificate Number 15079 |

9" BOP - 3000psi



2 CASING STRING

Casing design

Hole Size: 12 1/4"
Surface @ +/- 1100'
9 5/8" 36# J-55

Hole Size: 8 1/2" Production @ +/- 4000' 7" 23# J-55

Cementing Design

Surface Casing

Fluid 1: Precede cement with 20 bbl

Fluid Volume: Fresh Water 20 bbl

Fluid 2: Mix and pump 655 sks

Premium Plus Cement Fluid Weight 14.80 lbm/gal

94 lbm/sk Premium Plus Cement (Cement) Slurry Yield: $1.35 \text{ ft}^3/\text{sk}$ Total Mixing Fluid: 6.39 Gal/sk 2 % Calcium Chloride (Accelerator)

> Top of Fluid: 0 ft

Calculated Fill: 700 ft Volume: 139.85 bbl

Production Casing

Fluid 1: Precede cement with 20 bbl

Fresh Water Fluid Volume: 20 bbl

Fluid 2: Lead with 215 sks

MidCon-2 Premium Plus Fluid Weight 11.1 lbm/gal

 $3.27 \text{ ft}^3/\text{sk}$ 2 % Calcium Chloride (Accelerator) Slurry Yield:

1 lbm/sk Pheno Seal - Blend (Lost Circulation Additive)

Top of Fluid: 0 ft

Volume: 125.21 bbl

Fluid 3: Tail-in with 150 sks

Premium Plus Cement Fluid Weight 13.2 lbm/gal 94 lbm/sk Premium Plus Cement (Cement) Slurry Yield: $1.35 \text{ ft}^3/\text{sk}$ 2 % Calcium Chloride (Accelerator) **Total Mixing Fluid:** 6.39 Gal/sk

Top of Fluid: 2420 ft

Volume: 36.07 bbl

Drilling Fluid Program

Surface Hole

| 12-1/4" Open Hole - (0'- 1,100') - 9-5/8" Casing | | | | | |
|--|--|--|--|--|--|
| Drilling Fluid System | Fresh Water/M-I Gel Spud Mud | | | | |
| Key Products | M-I Gel, Soda Ash, Drilling Paper, Lime, Fibrous LCM | | | | |
| Solids Control | Adjustable Linear Shaker | | | | |
| Potential Problems | Seepage Losses, Total Losses, Hole Cleaning | | | | |

| Interval Drilling Fluid Properties | | | | | |
|------------------------------------|---------------------------|------------------------------|---|---------------------------------|------------------------|
| Depth Interval (ft) | Mud Weight (lb/gal) | Plastic Viscosity (cp) | Yield Point (lb/100ft ²⁾ | API Fluid Loss (ml/30min) | Drill Solids (%) |
| 0 - 1,100 | 8.4 - 8.8 | 2 - 4 | 3 - 5 | NC | <5.0 |

Production Hole

| | 4 <u>0</u> 00 | | | | | |
|--|--|--|--|--|--|--|
| 8 1/2" Open Hole - (1,100'- 3 ,100 ') - 7" Casing | | | | | | |
| | Fresh Water KCL Water (optional) | | | | | |
| Key Products | MI Gel, My-Lo-Jel, MF-55, Fibrous LCM, MI Bar, Caustic Soda, | | | | | |
| | Duo Vis (optional) | | | | | |
| Solids Control | Reserve Pit, Adjustable Linear Shaker | | | | | |
| Potential Problems | Seepage Losses, Total Losses, Hole Cleaning | | | | | |

| Interval Drilling Fluid Properties | | | | | | |
|------------------------------------|---------------------------|------------------------------|---|---------------------------------|------------------------|--|
| Depth Interval (ft) | Mud Weight (lb/gal) | Plastic Viscosity (cp) | Yield Point (lb/100ft ²⁾ | API Fluid Loss (ml/30min) | Drill Solids (%) | |
| 1,100 - 2,300 | 8.4 - 8.6 | 1 - 2 | 1 - 2 | NC | <5 | |
| *1,100-2,300 | 8.4 - 8.6 | 1 - 2 | 1 - 2 | 10 | <5 | |
| 2,300 - 3,100 | 8.4 - 10.0 | 8 - 12 | 10 - 14 | 8 - 10 | <2 | |

Form C-144 June 24, 2008

District I
1625 N. French Dr., Hobbs, NM 88240
1626 N. French Dr., Hobbs, NM 88240
1627 District III
1820 Road, Azec, NM 87410
1820 South St. Francis Dr.

For temporary pits, closed-loop systems, and below-grade tanks, submit to the appropriate NMOCD District Office.

For permanent pits and exceptions submit to

For permanent pits and exceptions submit to the Santa Fe Environmental Bureau office and provide a copy to the appropriate NMOCD District Office.

Pit, Closed-Loop System, Below-Grade Tank, or Proposed Alternative Method Permit or Closure Plan Application

| Type of action: | Permit of a pit, closed-loop system, below-grade tank, or proposed alternative method |
|-----------------|--|
| | Closure of a pit, closed-loop system, below-grade tank, or proposed alternative method |

Instructions: Please submit one application (Form C-144) per individual pit, closed-loop system, below-grade tank or alternative request

| Please be advised that approval of this request does not relieve the operator of lia environment. Nor does approval relieve the operator of its responsibility to com | ability should operations result in pollution of surface water, ground water or the ply with any other applicable governmental authority's rules, regulations or ordinances. |
|---|--|
| Operator: _OXY USA Inc. | OGRID #: |
| Address: P.O. Box 303 Amistad NM 88410 | |
| Facility or well name: Bravo Dome Unit Well 2129-161G | |
| API Number: 30 - 021 - 20493 | OCD Permit Number: |
| | 21N Range 29E County: Harding |
| Center of Proposed Design: Latitude 36 degrees 03' 07.42" Longitude | e 103 degrees 51' 12.46" NAD: □1927 ☒ 1983 |
| Surface Owner: Federal State Private Tribal Trust or Indian | Allotment |
| ☑ Pit: Subsection F or G of 19.15.17.11 NMAC | Closed-loop System: Subsection H of 19.15.17.11 NMAC |
| Temporary: 🛛 Drilling 🔲 Workover | ☐ Drying Pad ☐ Tanks ☐ Haul-off Bins ☐ Other |
| ☐ Permanent ☐ Emergency ☐ Cavitation ☐ Steel Pit | ☐ Lined ☐ Unlined |
| ☑ Lined ☐ Unlined | Liner type: Thicknessmil |
| Liner type: Thickness 20mil X LLDPE HDPE PVC | ☐ Other |
| Other String-Reinforced | Seams: Welded Factory Other |
| Seams: 🛛 Welded 🖾 Factory 🔲 Other | Volume:bblyd ³ |
| Volume: 1525 bbl Dimensions: L 80' x W 80' x D 10' | Dimensions: Lengthx Width |
| Below-grade tank: Subsection I of 19.15.17.11 NMAC | Fencing: Subsection D of 19.15.17.11 NMAC |
| Volume:bbl | ☐ Chain link, six feet in height, two strands of barbed wire at top |
| Type of fluid: | ☐ Four foot height, four strands of barbed wire evenly spaced between one and |
| Tank Construction material: | four feet |
| Secondary containment with leak detection | Netting: Subsection E of 19.15.17.11 NMAC |
| ☐ Visible sidewalls, liner, 6-inch lift and automatic overflow shut-off | Screen Netting Other_ |
| ☐ Visible sidewalls and liner | ☑ Monthly inspections |
| ☐ Visible sidewalls only | Signs: Subsection C of 19.15.17.11 NMAC |
| ☐ Other | ☐ 12'x24', 2' lettering, providing Operator's name, site location, and |
| Liner type: Thicknessmil HDPE PVC | emergency telephone numbers |
| Other | ☐ Signed in compliance with 19.15.3.103 NMAC |
| Alternative Method: Submittal of an exception request is required. Exceptions must be submitted to the Santa Fe Environmental Bureau office for consideration | Administrative Approvals and Exceptions: Justifications and/or demonstrations of equivalency are required. Please refer to 19.15.17 NMAC for guidance. |
| of approval. | Please check a box if one or more of the following is requested, if not leave |
| | blank: Administrative approval(s): Requests must be submitted to the |
| | appropriate division district or the Santa Fe Environmental Bureau office for |
| | consideration of approval. Exception(s): Requests must be submitted to the Santa Fe |
| | Environmental Bureau office for consideration of approval. |

| Siting Criteria (regarding permitting): 19.15.17.10 NMAC Instructions: The applicant must demonstrate compliance for each siting criteria below in the application. Recommendations of acceptable source material are provided below. Requests regarding changes to certain siting criteria may require administrative approval from the appropriate district office or may be considered an exception which must be submitted to the Santa Fe Environmental Bureau office for consideration of approval. Applicant must attach justification for request. Please refer to 19.15.17.10 NMAC for guidance. Siting criteria does not apply to drying pads or above-grade tanks associated with a closed-loop system. | | | | |
|---|--------------------|--|--|--|
| Ground water is less than 50 feet below the bottom of the temporary pit, permanent pit, or below-grade tank. - NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells | ☐ Yes 🛛 No | | | |
| Within 300 feet of a continuously flowing watercourse, or 200 feet of any other significant watercourse or lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark). - Topographic map; Visual inspection (certification) of the proposed site | ☐ Yes ⊠ No | | | |
| Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application. (Applies to temporary, emergency, or cavitation pits and below-grade tanks) - Visual inspection (certification) of the proposed site; Aerial photo; Satellite image | ☐ Yes ☑ No ☐ NA | | | |
| Within 1000 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application. (Applies to permanent pits) - Visual inspection (certification) of the proposed site; Aerial photo; Satellite image | ☐ Yes ☑ No ☐ NA | | | |
| Within 500 horizontal feet of a private, domestic fresh water well or spring that less than five households use for domestic or stock watering purposes, or within 1000 horizontal feet of any other fresh water well or spring, in existence at the time of initial application. - NM Office of the State Engineer - iWATERS database search; Visual inspection (certification) of the proposed site | ☐ Yes ☑ No | | | |
| Within incorporated municipal boundaries or within a defined municipal fresh water well field covered under a municipal ordinance adopted pursuant to NMSA 1978, Section 3-27-3, as amended. - Written confirmation or verification from the municipality; Written approval obtained from the municipality | Yes No | | | |
| Within 500 feet of a wetland. - US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site | ☐ Yes ☒ No | | | |
| Within the area overlying a subsurface mine. - Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division | ☐ Yes ☒ No | | | |
| Within an unstable area. - Engineering measures incorporated into the design; NM Bureau of Geology & Mineral Resources; USGS; NM Geological Society; Topographic map | ☐ Yes ☒ No | | | |
| Within a 100-year floodplain FEMA map | ☐ Yes ☒ No | | | |
| Temporary Pits, Emergency Pits, and Below-grade Tanks Permit Application Attachment Checklist: Subsection B of 19.15.17.9 NMAC Instructions: Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the documents are attached. □ Hydrogeologic Report (Below-grade Tanks) - based upon the requirements of Paragraph (4) of Subsection B of 19.15.17.9 NMAC □ Hydrogeologic Data (Temporary and Emergency Pits) - based upon the requirements of Paragraph (2) of Subsection B of 19.15.17.9 NMAC □ Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC □ Design Plan - based upon the appropriate requirements of 19.15.17.11 NMAC □ Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC □ Closure Plan - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC □ Previously Approved Design (attach copy of design) API Number: or Permit Number: or Permit Number: | | | | |
| Closed-loop Systems Permit Application Attachment Checklist: Subsection B of 19.15.17.9 NMAC Instructions: Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the do | ocuments are | | | |
| attached. Geologic and Hydrogeologic Data (required for on-site closure) - based upon the requirements of Paragraph (3) of Subsection B of Siting Criteria Compliance Demonstrations (required for on-site closure) - based upon the appropriate requirements of 19.15.17.10 Design Plan - based upon the appropriate requirements of 19.15.17.11 NMAC Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC Closure Plan - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC NMAC | 19.15.17.9 | | | |
| Previously Approved Design (attach copy of design) API Number: | | | | |

| Permanent Pits Permit Application Checklist: Subsection B of 19.15.17.9 NMAC | |
|--|--------------------|
| Instructions: Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the do attached. | cuments are |
| Hydrogeologic Report - based upon the requirements of Paragraph (1) of Subsection B of 19.15.17.9 NMAC Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC Climatological Factors Assessment | |
| □ Certified Engineering Design Plans - based upon the appropriate requirements of 19.15.17.11 NMAC □ Dike Protection and Structural Integrity Design - based upon the appropriate requirements of 19.15.17.11 NMAC □ Leak Detection Design - based upon the appropriate requirements of 19.15.17.11 NMAC □ Liner Specifications and Compatibility Assessment - based upon the appropriate requirements of 19.15.17.11 NMAC □ Quality Control/Quality Assurance Construction and Installation Plan □ Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC □ Freeboard and Overtopping Prevention Plan - based upon the appropriate requirements of 19.15.17.11 NMAC □ Nuisance or Hazardous Odors, including H₂S, Prevention Plan □ Emergency Response Plan | |
| ☐ Oil Field Waste Stream Characterization ☐ Monitoring and Inspection Plan | |
| ☐ Erosion Control Plan | |
| Closure Plan - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC Proposed Closure: 19.15.17.13 NMAC | |
| Type: Drilling Workover Emergency Cavitation Permanent Pit Below-grade Tank Closed-loop System | 7 Alternative |
| Proposed Closure Method: Waste Excavation and Removal Waste Removal (Closed-loop systems only) On-site Closure Method (Only for temporary pits and closed-loop systems) In-place Burial On-site Trench Burial Alternative Closure Method (Exceptions must be submitted to the Santa Fe Environmental Bureau for cor | |
| Siting Criteria (regarding on-site closure methods only): 19.15.17.10 NMAC | |
| Instructions: Each siting criteria requires a demonstration of compliance in the closure plan. Recommendations of acceptable source material are provided below. Requests regarding changes to certain siting criteria may require administrative approval from the appropriate district office or may be considered an exception which must be submitted to the Santa Fe Environmental Bureau office for consideration of approval. Justifications and/or demonstrations of equivalency are required. Please refer to 19.15.17.10 NMAC for guidance. | |
| Ground water is less than 50 feet below the bottom of the buried waste. - NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells | ☐ Yes ☒ No ☐ NA |
| Ground water is between 50 and 100 feet below the bottom of the buried waste - NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells | Yes No |
| Ground water is more than 100 feet below the bottom of the buried waste. - NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells | ☐ Yes ☒ No ☐ NA |
| Within 300 feet of a continuously flowing watercourse, or 200 feet of any other significant watercourse or lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark). - Topographic map; Visual inspection (certification) of the proposed site | ☐ Yes ☒ No |
| Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application. - Visual inspection (certification) of the proposed site; Aerial photo; Satellite image | ☐ Yes ☒ No |
| Within 500 horizontal feet of a private, domestic fresh water well or spring that less than five households use for domestic or stock watering purposes, or within 1000 horizontal feet of any other fresh water well or spring, in existence at the time of initial application. - NM Office of the State Engineer - iWATERS database; Visual inspection (certification) of the proposed site | ☐ Yes ☒ No |
| Within incorporated municipal boundaries or within a defined municipal fresh water well field covered under a municipal ordinance adopted pursuant to NMSA 1978, Section 3-27-3, as amended. - Written confirmation or verification from the municipality; Written approval obtained from the municipality | ☐ Yes ☒ No |
| Within 500 feet of a wetland US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site | ☐ Yes ⊠ No |
| Within the area overlying a subsurface mine. - Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division | ☐ Yes ☒ No |
| Within an unstable area. - Engineering measures incorporated into the design; NM Bureau of Geology & Mineral Resources; USGS; NM Geological Society; Topographic map | ☐ Yes ☑ No |
| Within a 100-year floodplain FEMA map | ☐ Yes 🛛 No |

| | 10 10 0 11 | CONTRACTOR OF THE CALCULATION OF | |
|--|--|--|--|
| Waste Excavation and Removal Closure Plan Checklist: (19.15.17.13 NMAC) Instructions: Each of the following items must be attached to the closure plan. Please indicate, by a check mark in the box, that the documents are attached. Protocols and Procedures - based upon the appropriate requirements of 19.15.17.13 NMAC Confirmation Sampling Plan (if applicable) - based upon the appropriate requirements of Subsection F of 19.15.17.13 NMAC Disposal Facility Name and Permit Number (for liquids, drilling fluids and drill cuttings) Soil Backfill and Cover Design Specifications - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC Re-vegetation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC | | | |
| | | at Utilize Haul-off Bins Only: (19.15.17.13.D NMAC) Instructions: Please indentify the facility | |
| | disposal of liquids, drilling fluids ar | | |
| Disposal Facility | | Disposal Facility Permit Number: Instructions: Each of the following items must be attached to the closure plan. Please indicate, | |
| by a check mark in Siting Criter Proof of Sur Construction Protocols an Confirmatio Waste Mate Disposal Fac Soil Cover I | in the box, that the documents are atta- ria Compliance Demonstrations - base face Owner Notice - based upon the a n and Design of Burial Trench (if app d Procedures - based upon the approp n Sampling Plan (if applicable) - base rial Sampling Plan - based upon the a cility Name and Permit Number (for I Design - based upon the appropriate ro on Plan - based upon the appropriate r | | |
| Operator Applica | tion Certification: | | |
| | | application is true, accurate and complete to the best of my knowledge and belief. | |
| Name (Print): Jan | nes E. Corley | Title: Operations team Leader | |
| Signature: | mes E. Corley | Date: 9/23/2008 | |
| 1/ | ddie_corley@oxy.com | Telephone: (575) 799-6849 | |
| OCD Approval: | Permit Application (including clo | cure nlan) \(\subseteq \text{Clocure Plan (only)} | |
| | | sure plan) [Closure Fight (only) | |
| OCD Representat | | | |
| OCD Representat | | Approval Date: 9/24/08 OCD Permit Number: | |
| Title: | oive Signature: 2 N/2 DISTRICT SUPERVISC | Approval Date: 9/24/08 | |
| Closure Report (r Closure Method: Waste Excavat If different from | DISTRICT SUPERVISC required within 60 days of closure continuous of the continuous | Approval Date: 9/24/08 OCD Permit Number: | |
| Closure Report (r Closure Method: Waste Excavat If different fro. Closure Report A mark in the box, ti Proof of Clo Proof of Dec Plot Plan Confirmatio Waste Mate Disposal Fa Soil Backfil Re-vegetatic Site Reclam | tive Signature: DISTRICT SUPERVISC required within 60 days of closure continuous and Removal On-Site Closure approved plan, please explain. Ittachment Checklist: Instructions: that the documents are attached. | Approval Date: 9/24/08 OCD Permit Number: | |
| Closure Report (r Closure Method: Waste Excavat If different fro. Closure Report A mark in the box, ti Proof of Clo Proof of Dec Plot Plan Confirmatio Waste Mate Disposal Fa Soil Backfil Re-vegetatic Site Reclam | cive Signature: DISTRICT SUPERVISC required within 60 days of closure companies and Removal On-Site Closure approved plan, please explain. Intachment Checklist: Instructions: that the documents are attached. In the documents are attached. In Sampling Analytical Results are also application and Permit Number ling and Cover Installation on Application Rates and Seeding Tecation (Photo Documentation) sure Location: Latitude | Approval Date: 9/24/08 OCD Permit Number: Dempletion Subsection K of 19.15.17.13 NMAC Closure Completion Date: Closure Method Alternative Closure Method Alternative Closure Method Each of the following items must be attached to the closure report. Please indicate, by a check Characteristic property Characteri | |
| Closure Report (r Closure Method: Waste Excavat If different from Closure Report A mark in the box, to Proof of Closure Report Plan Confirmatio Waste Mate Disposal Fall Soil Backfil Re-vegetatic Site Reclam On-site Clo Operator Closure I hereby certify tha | cive Signature: DISTRICT SUPERVISC required within 60 days of closure companies of the documents are attached. In the documents are attached. In Sampling Analytical Results are attached. In Sampling An | Approval Date: 9/24/08 OCD Permit Number: Dempletion Subsection K of 19.15.17.13 NMAC Closure Completion Date: Closure Method Alternative Closure Method Alternative Closure Method Each of the following items must be attached to the closure report. Please indicate, by a check Characteristic property Characteri | |
| Closure Report (r Closure Method: Waste Excavat If different from Closure Report A mark in the box, to Proof of Closure Report Plan Confirmatio Waste Mate Disposal Fall Soil Backfil Re-vegetatic Site Reclam On-site Clo Operator Closure I hereby certify tha | cive Signature: DISTRICT SUPERVISC required within 60 days of closure companies of the documents are attached. In the documents are attached. In Sampling Analytical Results are attached. In Sampling An | Approval Date: 9/24/08 OCD Permit Number: | |
| Closure Report (r Closure Method: Waste Excavat If different from Closure Report A mark in the box, to Proof of Closure Report Plan Confirmatio Waste Mate Disposal Fall Soil Backfil Re-vegetatic Site Reclam On-site Clo Operator Closure I hereby certify the belief. I also certify | cive Signature: DISTRICT SUPERVISC required within 60 days of closure complete complete complete within 60 days of closure complete complete complete complete complete complete within 60 days of closure complete | Approval Date: 9/24/08 OCD Permit Number: | |



Pit Design and Construction Plan

In accordance with Rule 19 15 17 the following information describes the design and construction of temporary pits on Occidental Permian Ltd (OXY) locations. This is OXY's standard procedure for all temporary pits. A separate plan will be submitted for any temporary pit which does not conform to this plan.

- 1. OXY will design and construct a temporary pit to contain liquids and solids and prevent contamination of fresh water and protect public health and environment.
- 2. Prior to constructing the pit, topsoil will be stockpiled in the construction zone for later use in restoration.
- 3. OXY will post a well sign, not less than 12" by 24", on the well site prior to construction of the temporary pit. The sign will list the operator on record as the operator, the location of the well site by unit letter, section, township range, and emergency telephone numbers.
- 4. OXY shall construct all new fences utilizing 4 strand barbed wire. T-posts shall be installed every 12 feet and corners shall be anchored utilizing a wooded posts. Entire location including pits will be fenced at all times.
- 5. OXY shall construct the temporary pit so that the foundation and interior slope are firm and free of rocks, debris, sharp edges or irregularities to prevent liner failure.
- 6. OXY shall construct the pit so that the slopes are no steeper than two horizontal feet to one vertical foot.
- 7. Pit walls will be walked down by a crawler type tractor following construction.
- 8. All temporary pits will be lined with 20-mil, string reinforced, LLDPE liner, complying with EPA SW-846 method 9090A requirements.
- 9. Geotextile will be installed beneath the liner when rocks, debris, sharp edges or irregularities cannot be avoided.



- 10. All liners will be anchored in the bottom of a compacted earth-filled trench at least 18 inches deep.
- 11. OXY will minimize liner seams and orient them up and down, not across a slope. Factory seams will be used whenever possible. OXY will ensure all field seams are welded by qualified personnel. Field seams will be overlapped four to six inches and will be oriented parallel to the line of maximum slope. OXY will minimize the number of field seams in corners and irregularly shaped areas.
- 12. The liner shall be protected from and fluid force or mechanical damage through the use of mud pit slides, or a manifold system.
- 13. The pit shall be protected form run-off by constructing and maintaining diversion ditches around the location or around the perimeter of the pit in some cases.
- 14. The volume of the pit shall not exceed 10 acre-feet, including freeboard.
- 15. Temporary blow pits will be constructed to allow gravity flow to discharge into the lined drill pit.
- 16. The lower half of the blow pit (nearest lined pit) will be lined with 20 mil liner. The upper half of the blow pit will remain unlined as allowed in Rule 19 15 17 11 F 11.
- 17. OXY will not allow freestanding liquids to remain on the unlined portion of the blow pit.



Maintenance and Operating Plan for Temporary Pits

In accordance with Rule 19 15 17, Occidental Permian Ltd (OXY) will maintain and operate a temporary pit in accordance with the following plan:

- 1. OXY will discharge into a temporary pit only fluids used or generated during the drilling or workover process.
- 2. OXY will maintain a temporary pit free of miscellaneous solid waste or debris.
- 3. Any hydrocarbon base drilling fluid generated during the drilling or workover operation will be contain in an appropriate tank, it will not be discharged into a temporary pit. If any measurable layer of oil from the surface of a temporary pit after any drilling or workover operation, OXY will remove it immediately.
- 4. OXY shall maintain at least two feet of freeboard for a temporary pit.
- 5. OXY will use a check list to perform a daily pit inspection while the drilling or workover rig is on-site. After drilling or workover operations, OXY will inspect the temporary pit weekly so long liquids remain in the temporary pit. A log of the inspections will be kept on the well file, inspections will be available for the district office's review upon request. OXY will file a copy of the log with the District IV office once temporary pit is closed.
- 6. OXY shall remove all free liquids from a temporary pit within 30 days from the date the drilling or workover rig is released.
- 7. OXY shall remove any liquids from the temporary pit used for cavitation within 48 hours after completing cavitation. OXY may request additional time to remove the liquids from The District IV Division Office if it is not feasible to remove the liquids with 48 hours.



| Wellname: | | | API #: | | Rig Mobe Date: | |
|--------------------|------|------------|---|---|---|--|
| County: | | | Pit liner thickness: | | Rig Demobe Date: | 2 |
| Inspection Date | Time | By Whom | Has any hazardous waste been disposed of in pit(s)? | Is the liner of the pit intact and free of penetrations? | Is there an oil absorbent boom on location? | Distance from top of pit to fluid level (minimum 2') |
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All pits to be inspected DAILY during drilling/workover operations.

Any penetration of the pit liner shall be reported to the NMOCD within 48 hours.

OXY Bravo Dome Pit Closure Plan

In accordance with Rule 19 15 17 12 NMAC the following information describes the closure requirements of temporary pits on locations. This is Oxy Bravo Dome's standard procedure for all temporary pits. A separate plan will be submitted for any temporary pit which does not conform to this plan.

All closure activities will include proper documentation and be available for review upon request and will be submitted to NMOCD within 60 days of pit closure. Closure report will be filed on C-144 and incorporate the following

- Details on Capping and Covering, where applicable
- Plot Plan (Pit Diagram)
- Inspection Reports
- Sampling Results

General Plan

- 1. Free standing liquids will be removed as soon as practical for recycle use in the drilling of other wells. Any free standing liquids that are not recycled will be removed prior to pit closure and disposed of in a division –approved facility or recycle, reuse or reclaim the liquids in a manner that the appropriate division district office approves. Pit solids will be allowed to air dry as completely as possible prior to starting pit closing activities.
- 2. The preferred method of closure for all temporary pits will be on-site burial, assuming that all the criteria listed in sub-section (8) of 19 15 17 13 are met
- 3. The surface owner shall be notified of Oxy Bravo Dome's proposed closure plan using a means that provides proof of notice i e, certified mail, return receipt requested.
- 4. Within 6 months of the Rig Off status occurring, Oxy Bravo Dome will ensure that temporary pits are closed, re-contoured.
- 5. Notice of Closure will be given to the Santa Fe Division office between 72 hours and one week of closure, via email, or verbally. The notification of closure will include the following:
 - I Operator's name
 - II Location by Unit Letter, Section, Township, and Range. Well name and API number

- 6. Liner of temporary pit shall be removed above "mud level" after stabilization. Removal of liner will consist of manually or mechanically cutting liner at mud level and removing all remaining liner. Care will be taken to remove "All" of the liner I e, edges of liner entrenched or buried. All excessive liner will be disposed of at a licensed disposal facility
- 7. Pit contents shall be tested prior to mixing of any soils. Test results will be compared to NMOCD limits. If the test results are within the NMOCD limits no soils will be mixed with the pit contents. If the sample results exceed the NMOCD limits the contents will be mixed with non-waste containing, earthen material in order to achieve the solidification process. The mixing ratio shall not exceed 3 parts clean soil to 1 part pit contents. The mixed contents will then be re-tested and the results will be compared to the NMOCD limits.
- 8. A five point composite sample will be taken of the pit using sampling tools and all samples tested per subsection B of 19 15 17 13(B)(1)(b). In the event that the criteria are not met, all contents will be handled per Subparagraph (a) of Paragraph (1) of Subsection B of 19 15 17 13 i e, Dig and Haul

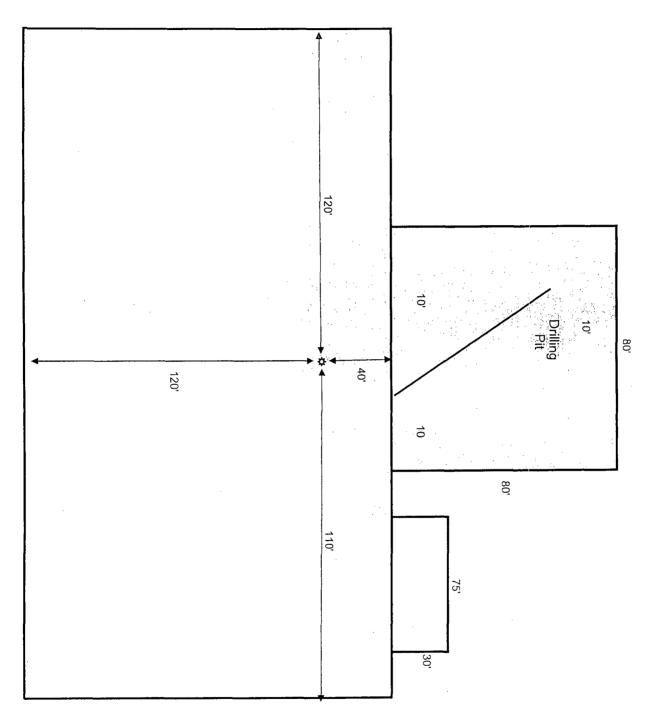
| Composites | Tests Method | Limit (mg/Kg) |
|------------|---------------------------|---------------|
| Benzene | EPA SW-846 8021B or 8260B | 0.2 |
| BTEX | EPA SW-846 8021B or 8260B | 50 |
| TPH | EPA SW-846 418 1 | 2500 |
| GRO/DRO | EPA SW-846 8015M | 500 |
| Chlorides | EPA 300 1 | 45500 |



- 9. Upon completion of testing, the pit area will be backfilled with compacted, non-waste containing, earthen material. A minimum of four feet of cover shall be achieved and the cover shall include one foot of suitable material to establish vegetation at the site, or the background thickness of topsoil, whichever is greater.
- 10.Re-contouring of location will match fit, shape, line, form and texture of the surrounding as closely as possible. Re-shaping will include drainage control, prevent ponding, and prevent erosion. Natural drainages will be unimpeded and water bars and/or silt traps will be placed in areas where needed to prevent erosion on a large scale. Final

- re-contour shall have a uniform appearance with smooth surface, fitting the natural landscape.
- 11. Notification will be sent to NMOCD when the reclaimed area is seeded
- 12. Bravo Dome shall seed the disturbed areas upon abandonment of the pit and well site. Seeding will be accomplished via drilling on the contour whenever practical or by other division-approved methods. Vegetative cover will equal 70% if the native perennial vegetative cover (un-impacted) consisting of at *least three native plant species*, including at least one grass, but not including noxious weeds, and maintain that cover through two successive growing seasons.
- 13. The temporary pit will be located with a steel marker, no less than four inches in diameter, cemented in a hole three feet deep in the center of the onsite burial upon the abandonment of all the wells on the pad. The marker will be flush with the ground to allow access of the active well pad and for safety concerns. The marker will include a threaded collar to be used for future abandonment. The top of the marker will contain a welded steel 12" square plate that indicated the onsite burial of the temporary pit. The plate will be easily removable and a four foot tall riser will be threaded into the top of the collar marker and welded around the base with the operator's information at the time of all wells on the pad are abandoned. The operator's information will include the following Operator Name, Lease Name, Well name and number, Unit Number, Section, Township, Range and an indicator that the marker is an onsite burial location

Bravo Dome Unit Location and Pit Design Capstar Rig



New Mexico Office of the State Engineer POD Reports and Downloads

| Township: 21N | Range: 29E | Sections: | 8,9,10,15,1 | 16,17,20,21,22 | |
|--|------------|-----------|-------------|----------------|-----------|
| NAD27 X: | Y: | Zone: | | Search Radius: | - |
| County: HA | Basin: | | | Number: | Suffix: |
| Owner Name: (First) | (La | st) | <u></u> | ○ Non-Domestic | ODomestic |
| POD / Surface Data Report Avg Depth to Water Report Water Column Report | | | | | |
| Clear Form iWATERS Menu Help | | | | | |
| AVERACE DEDMU OF WAMER REPORM 00/22/2009 | | | | | |

(Depth Water in Feet) Bsn Tws Rng Sec Zone X Y Wells Max

No Records found, try again

| ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. | A. Signature X. J. A. Address B. Received by (Printed Name) Mary C. Gonzalos 9.9-08 | | |
|--|---|--|--|
| 1. Article Addressed to: | D. Is delivery address different from item 1? | | |
| 189 Gonzales Road Bueyeros, NM 88412 | 3. Service Type ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes | | |
| 2. Article Number (Transfer from service label) 7008 0150 | 0000 7518 3221 | | |
| PS Form 3811, February 2004 Domestic Retu | urn Receipt 102595-02-M-1540 | | |

| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY |
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| ☐ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ☐ Print your name and address on the reverse so that we can return the card to you. ☐ Attach this card to the back of the mailpiece or on the front if space permits. 1. Article Addressed to: | A. Signature A. Signature A. Agent Addressee B. Received by (<i>Printed Name</i>) C. Date of Delivery 9-15-0 f D. Is delivery address different from item 1? Yes If YES, enter delivery address below: |
| P.O. Box 459 Santana, KS 67870 | 3. Service Type ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes |
| 2. Article Number (Transfer from service label, 7008 0150 | 0000 7518 3047 |
| PS Form 3811, February 2004 Domestic Retu | urn Receipt 102595-02-M-1540 ^c |