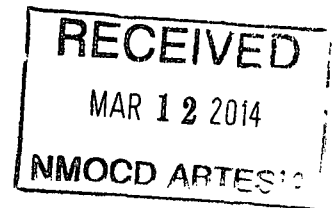


**BURNETT OIL CO.
POLY LINE LEAK
GISSLER A LEASE
SECT. 23 TWS. 17 S., RNG. 30 E.
GPS LATITUDE 32 49 672
LONGITUDE 103 56 168**



WORKPLAN

**Prepared By
Eddie Seay Consulting
January 2014**

WORKPLAN

General:

Leak occurred on December 20, 2013, with less than five barrels spilled. Leak affected an area 20 x 50 approximately. No spill report was filed. Will remediate as BLM approves.

Groundwater:

According to State Engineer and groundwater information, the depth of water occurs at approximately 300 feet below surface.

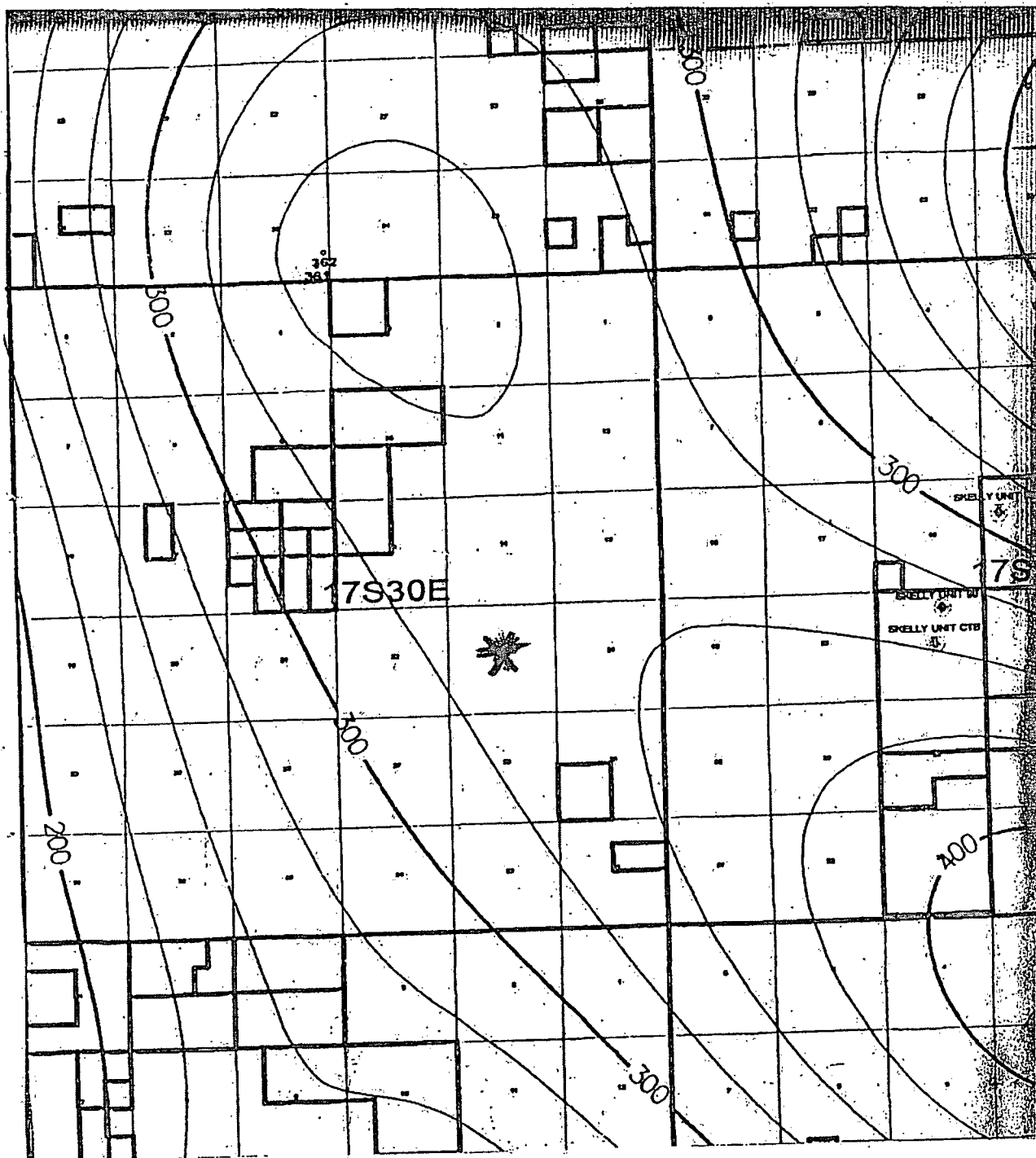
Remediation Proposal:

Our cleanup will be to excavate contaminated soil, haul to an approved facility and replace with clean soil and seed with LPC as BLM requires. Before backfilling, the area will be tested for TPH, BTEX and Chloride to assure we meet BLM guidelines, and only after BLM approves, we will backfill and level.

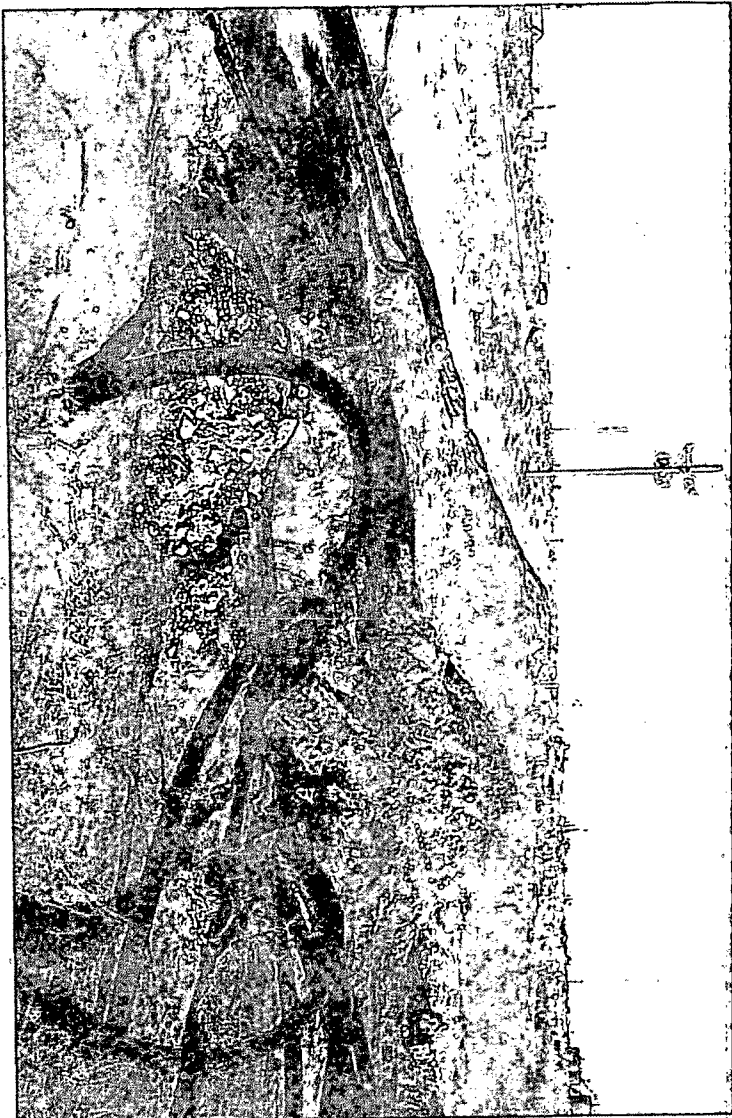
The BLM will be notified of all activities and a report will be filed upon completion.

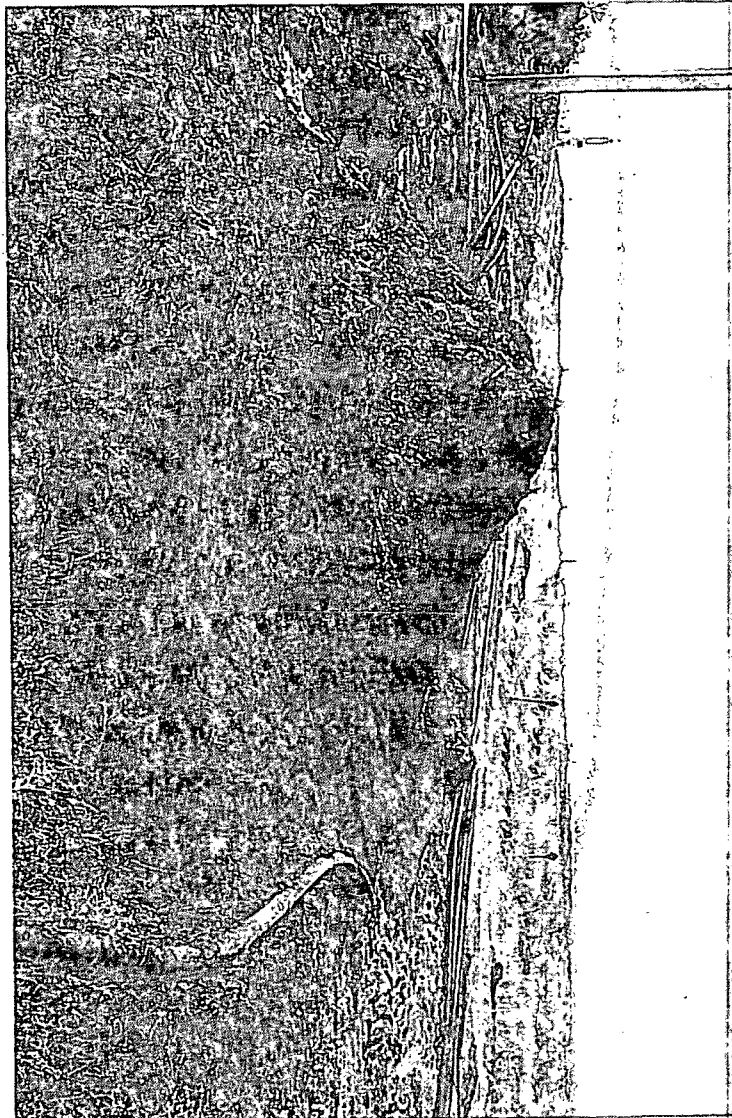
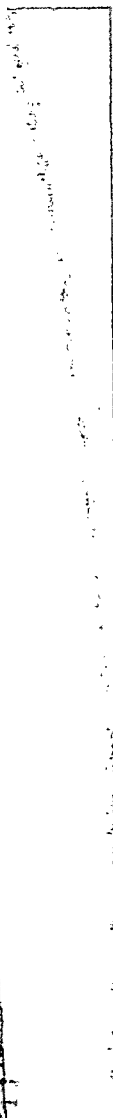
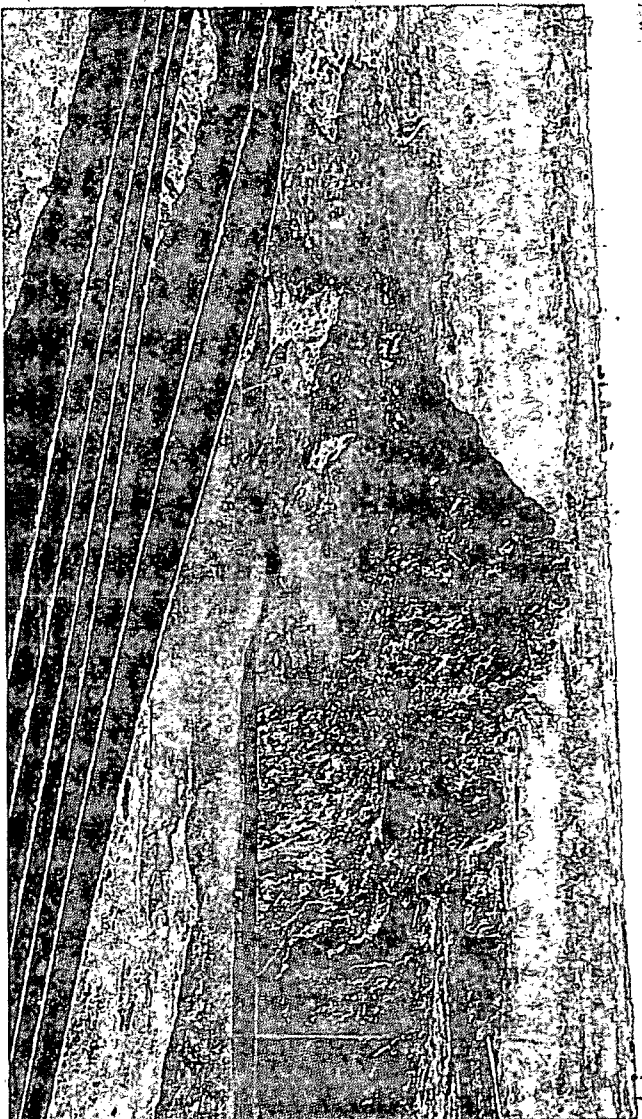
Ranking Criteria Score: 0

This site has a 5000 ppm TPH cleanup and will cleanup BTEX and Chloride per BLM.



Groundwater Map





SAMPLE REPORTING FORMAT
(Submit in duplicate)

Subject: Report of Undesirable Event

Date of Occurrence: 12-17-2013 Time of Occurrence: 5:00 a.m., p.m.

Date Reported to USGS _____ Time Reported to USGS: _____ a.m., p.m.

Location: State NM; County Eddy
____ & ____ Section 23 T. 17 S. R. 30 E., _____ Meridian

Operator: Burnett Oil Co

Surface Ownership: FEDERAL, INDIAN, FEE, STATE

Lease Number: NALNO29388A; Unit Name or C.A. Number Sixer H 46

Type of Event: BLOWOUT, FIRE, FATALITY, INJURY, PROPERTY DAMAGE, OIL SPILL,
SALTWATER SPILL, TOXIC FLUID SPILL, OIL AND SALTWATER SPILL,
OIL AND TOXIC FLUID SPILL, SALTWATER AND TOXIC FLUID SPILL,
GAS VENTING, or OTHER (Specify) Flow Line Ruptured

Cause of Event: High Line Pressure

Volumes of Pollutants I. Discharged or Consumed: oil & water mixed
II. Recovered: 20 bbls with vacuum truck

Time Required to Control Event (in hours): 1 Hr

Action Taken to Control the Event, Description of Resultant Damage,
Clean-up Procedures, and Dates: shut well off & Replaced
Damaged Line

Cause and Extent of Personnel Injury: _____

Other Federal, State, and Local Governmental Agencies Notified: _____

Action Taken to Prevent Recurrence: New Line has been installed

General Remarks: Eddy Seay has filed clean up
Report

Signature [Signature] Date 1-10-2014
Title District Superintendent

FOR USGS USE ONLY
District _____ Date Reported to Reston _____ Event Classifi-
cation _____ Date of Onsite Inspection _____ Remarks _____