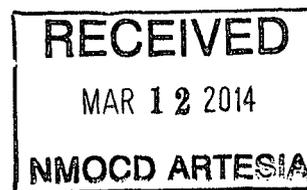


January 10, 2014

Bureau of Land Management
ATTN: Mike Burton
620 E. Green St.
Carlsbad, NM 88220



RE: Burnett Oil Co.
Revised Work Plan
Gissler B2 Battery - Section 23

Mr. Burton:

Find attached a revised "Work Plan" as you requested.

I appreciate your approval of the Gissler A 46 plan, and will see that conditions are implemented.

Should you need anything further, please let me know.

Thanks,

A handwritten signature in cursive script that reads "Eddie W. Seay". The signature is written in black ink and has a long, sweeping tail that extends to the right.

Eddie W. Seay, Agent
Eddie Seay Consulting
601 W. Illinois
Hobbs, NM 88242
575-392-2236
seay04@leaco.net

cc: Burnett Oil

**BURNETT OIL CO.
GISSLER B 2 BATTERY
HEATER TREATER LEAK
SECT. 23 TWS. 17 S., RNG. 30 E.
GPS LATITUDE 32 49 081
LONGITUDE 103 56 295**

**(REVISED)
WORKPLAN**

**Prepared By
Eddie Seay Consulting
January 2014**

WORKPLAN

General:

On December 22, 2013, a hole came into fire tube gasket at Heater causing oil to spray into pasture South of battery. Spray area was approximately 100 x 250. Heater was repaired and area around heater cleaned. Spill report filed 1-10-14.

Groundwater:

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

Remediation Proposal:

My recommendation for cleanup of spray area:

- 1) File "work plan" for BLM approval.
- 2) After approval, do one call for the work area.
- 3) Notify BLM prior to implementing work plan.
- 4) Deliver a copy to the contractor performing the work, so all approved work will be followed.
- 5) We will sample spill site prior to starting excavation and determine the vertical and horizontal extent of cleanup. (Notify BLM before sampling)
- 6) Excavate the contaminated area as delineation samples show, and as approved. Hauling all contaminated soil to an approved disposal.
- 7) RE-sample excavation to confirm cleanup. Submit lab test to BLM officer for final approval of cleanup.
- 8) Only after BLM approves of analytical results, backfill will occur.
- 9) Backfill area with clean ambient soil to original contour and like conditions. Also contour any part of work area that was disturbed.
- 10) Install erosion control of remediation area to prevent washing or blowing of reclaimed area.
- 11) Rip and seed impacted area and seed with BLM approved mix or LPC seed.
- 12) Berm or barricade area to prevent access.
- 13) Continue to monitor impacted area to ensure re-vegetation.
- 14) File final report with all attachments to work.

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.

SAMPLE REPORTING FORMAT
(Submit in duplicate)

Subject: Report of Undesirable Event

Date of Occurrence: 12-22-2013 Time of Occurrence: 2:30 a.m., p.m.

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

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

Operator: Burnett Oil Co

Surface Ownership: FEDERAL, INDIAN, FEE, STATE

Lease Number: NM 2748; Unit Name or C.A. Number Gissler B2 Btry

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) Fire Tube gasket

Cause of Event: Faulty gasket

Volumes of Pollutants I. Discharged or Consumed: Minimal spray
II. Recovered: none *covered large area*
to north wind

Time Required to Control Event (in hours): 1 1/2 hrs

Action Taken to Control the Event, Description of Resultant Damage,
Clean-up Procedures, and Dates: switch out of heater into
TEST Heater will replace fire tube gasket

Cause and Extent of Personnel Injury: _____

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

Action Taken to Prevent Recurrence: _____

General Remarks: _____

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 _____