

REQUEST FOR EXTENSION

December 23, 2020

Cory Smith
New Mexico Oil Conservation Division
Aztec Office
1000 Rio Brazos Rd.
Aztec, NM 87410

Re: NEU 2207 16B Recycling Facility 3RF-28

Mr. Smith:

Enduring Resources (OGRID 372286) was granted a variance from the cessation of operation closure requirements in 19.15.31.13 NMAC for the NEU 2207 16B Recycling Facility 3RF-28 in September 2020 due to the effects of the COVID-19 pandemic on operations. Enduring respectfully requests an additional extension to the determination of cessation of operations because the pandemic continues to reduce the ability to organize work, receive products and equipment, and receive approvals for activities. Enduring will continue to maintain the recycling facility in a manner that ensures protection of fresh water, public health, and the environment.

Per the conditions of approval received via electronic mail on September 30, 2020, this extension request should have been submitted no later than December 1, 2020. Due to personnel changes at Enduring this fall, the December 1 deadline was not communicated to the appropriate staff at Enduring and, regretfully, was missed. This request is being submitted as soon as the error was discovered. Enduring appreciates your flexibility and understanding in this matter.

Sincerely,



Deidre Duffy
Authorized Agent on behalf of Enduring Resources
WSP USA, Inc.

ATTACHMENTS:

Form C-147
Weekly Inspection Records

District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 S. First St., Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy Minerals and Natural Resources
Department
Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-147
Revised April 3, 2017

Recycling Facility and/or Recycling Containment

Type of Facility: Recycling Facility Recycling Containment*
Type of action: Permit Registration
 Modification Extension
 Closure Other (explain) Variance Request

* At the time C-147 is submitted to the division for a Recycling Containment, a copy shall be provided to the surface owner.

Be advised that approval of this request does not relieve the operator of liability should operations result in pollution of surface water, ground water or the environment. Nor does approval relieve the operator of its responsibility to comply with any other applicable governmental authority's rules, regulations or ordinances.

1.
Operator: Enduring Resources, LLC (For multiple operators attach page with information) OGRID #: 372286
Address: 200 Energy Court, Farmington, NM 87401
Facility or well name (include API# if associated with a well): NEU 2207-16B Water Recycle Facility
OCD Permit Number: 3RF-28 (For new facilities the permit number will be assigned by the district office)
U/L or Qtr/Qtr NW/4 NE/4 Section 16 Township 22N Range 7W County: Sandoval
Surface Owner: Federal State Private Tribal Trust or Indian Allotment

2.
 Recycling Facility:
Location of recycling facility (if applicable): Latitude 36.144262 Longitude -107.576376 NAD83
Proposed Use: Drilling* Completion* Production* Plugging*
**The re-use of produced water may NOT be used until fresh water zones are cased and cemented*
 Other, *requires permit for other uses. Describe use, process, testing, volume of produced water and ensure there will be no adverse impact on groundwater or surface water.*
 Fluid Storage
 Above ground tanks Recycling containment Activity permitted under 19.15.17 NMAC explain type _____
 Activity permitted under 19.15.36 NMAC explain type: _____ Other explain _____
 For multiple or additional recycling containments, attach design and location information of each containment
 Closure Report (required within 60 days of closure completion): Recycling Facility Closure Completion Date: _____

3.
 Recycling Containment:
 Annual Extension after initial 5 years (attach summary of monthly leak detection inspections for previous year)
Center of Recycling Containment (if applicable): Latitude 36.144262 Longitude -107.576376 NAD83
 For multiple or additional recycling containments, attach design and location information of each containment
 Lined Liner type: Thickness 60 mil LLDPE HDPE PVC Other _____
 String-Reinforced
Liner Seams: Welded Factory Other _____ Volume: 309,800 bbl Dimensions: L 360 x W 360 x D 20
 Recycling Containment Closure Completion Date: _____

4.

Bonding:

- Covered under bonding pursuant to 19.15.8 NMAC per 19.15.34.15(A)(2) NMAC (These containments are limited to only the wells owned or operated by the owners of the containment.)
- Bonding in accordance with 19.15.34.15(A)(1). Amount of bond \$ _____ (work on these facilities cannot commence until bonding amounts are approved)
- Attach closure cost estimate and documentation on how the closure cost was calculated.

5.

Fencing:

- Four foot height, four strands of barbed wire evenly spaced between one and four feet
- Alternate. Please specify 8' Tall Chain Link Fencing

6.

Signs:

- 12"x 24", 2" lettering, providing Operator's name, site location, and emergency telephone numbers
- Signed in compliance with 19.15.16.8 NMAC

7.

Variances:

Justifications and/or demonstrations that the proposed variance will afford reasonable protection against contamination of fresh water, human health, and the environment.

Check the below box only if a variance is requested:

- Variance(s): Requests must be submitted to the appropriate division district for consideration of approval. If a Variance is requested, include the variance information on a separate page and attach it to the C-147 as part of the application.
- If a Variance is requested, it must be approved prior to implementation.**

8.

Siting Criteria for Recycling Containment

Instructions: The applicant must provide attachments that demonstrate compliance for each siting criteria below as part of the application. Potential examples of the siting attachment source material are provided below under each criteria.

General siting

Ground water is less than 50 feet below the bottom of the Recycling Containment.

NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells

- Yes No
- NA

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
- NA

Within the area overlying a subsurface mine.

- Written confirmation or verification or map from the NM EMNRD-Mining and Minerals 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

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 1000 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 spring or a fresh water well used for domestic or stock watering purposes, 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 500 feet of a wetland.

- US Fish and Wildlife Wetland Identification map; topographic map; visual inspection (certification) of the proposed site

- Yes No

9.

Recycling Facility and/or Containment Checklist:

Instructions: Each of the following items must be attached to the application. Indicate, by a check mark in the box, that the documents are attached.

- Design Plan - based upon the appropriate requirements.
- Operating and Maintenance Plan - based upon the appropriate requirements.
- Closure Plan - based upon the appropriate requirements.
- Site Specific Groundwater Data -
- Siting Criteria Compliance Demonstrations -
- Certify that notice of the C-147 (only) has been sent to the surface owner(s)**

10.

Operator Application Certification:

I hereby certify that the information and attachments submitted with this application are true, accurate and complete to the best of my knowledge and belief.

Name (Print): Deidre Duffy Title: Senior Ecologist

Signature:  Date: 12/23/2020

e-mail address: deidre.duffv@wsp.com Telephone: (808) 352-0200

11.

OCD Representative Signature: Victoria Venegas Approval Date: 04/08/2021

Title: Environmental Specialist OCD Permit Number: 3RF-28

- OCD Conditions _____
- Additional OCD Conditions on Attachment



Enduring Resources, LLC

Recycling Facility Inspection Sheet

SITE INFORMATION

Location Name NEU 2207-16B Permit Number SI-4301 Pod 1
 Section 16 Township 22N Range 7W County Sandoval State NM
 Time Inspection Began 11:06 Time Inspection Ended 11:39
 Recycling Facility Recycling Containment Water Level (Feet) 19

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input checked="" type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Lower Leak Detection (LLD)

Water Present in ULD?	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	Water Present in LLD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
Total Depth of ULD (ft)		<u>79.85</u>			Total Depth of LLD (ft)		<u>77.1</u>		
Depth to Water in ULD (ft)		<u>79.4</u>			Depth to Water in LLD (ft)		<u>77.1</u>		
Height of Water in ULD		<u>0.25</u>			Height of Water in LLD		<u>0</u>		
Gallons of Water Removed		<u>0</u>			Gallons of Water Removed		<u>0</u>		

If leak detection contained liquid, was it removed? YES NO NA
 If leak detection contained liquid, was HSE notified? YES NO NA

COMMENTS

Not enough water to pump

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Name (Print) Tina Harris Date 9-2-20
 Name (Signature) [Signature] Company ER



Enduring Resources, LLC

Recycling Facility Inspection Sheet

SITE INFORMATION

Location Name NEU 2207-16B Permit Number SI 4301-Pod 1
 Section 16 Township 22N Range 7W County Sandoval State NM
 Time Inspection Began 10:21 AM Time Inspection Ended 10:43
 Recycling Facility Recycling Containment Water Level (Feet) 19

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Lower Leak Detection (LLD)

Water Present in ULD? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	Water Present in LLD? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
Total Depth of ULD (ft) <u>79.83</u>	Total Depth of LLD (ft) <u>77.1</u>
Depth to Water in ULD (ft) <u>79.6</u>	Depth to Water in LLD (ft) <u>77.1</u>
Height of Water in ULD <u>0.23</u>	Height of Water in LLD <u>0</u>
Gallons of Water Removed <u>0</u>	Gallons of Water Removed <u>0</u>

If leak detection contained liquid, was it removed? YES NO NA
 If leak detection contained liquid, was HSE notified? YES NO NA

COMMENTS

Not enough water to remove

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Name (Print) Tina Harris

Date 9-9-20

Name (Signature) *Tina Harris*

Company ER



Enduring Resources, LLC

Recycling Facility Inspection Sheet

SITE INFORMATION

Location Name NEH 2207-16B Permit Number 51-4301 Pod 1
 Section 14 Township 22N Range 7W County Sandoval State NM
 Time Inspection Began 8:15 Time Inspection Ended 9:02
 Recycling Facility Recycling Containment Water Level (Feet) 18.5

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)			Lower Leak Detection (LLD)						
Water Present in ULD?	YES	<input checked="" type="checkbox"/>	NO	<input checked="" type="checkbox"/>	Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
Total Depth of ULD (ft)		<u>79.8</u>			Total Depth of LLD (ft)		<u>77.1</u>		
Depth to Water in ULD (ft)		<u>79.7</u>			Depth to Water in LLD (ft)		<u>77.1</u>		
Height of Water in ULD		<u>.1</u>			Height of Water in LLD		<u>0</u>		
Gallons of Water Removed		<u>0</u>			Gallons of Water Removed		<u>0</u>		

If leak detection contained liquid, was it removed? YES NO NA
 If leak detection contained liquid, was HSE notified? YES NO NA

COMMENTS

Not enough water to pump.

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Replaced 2 beach balls

Name (Print) Tina Harris Date 9-16-20

Name (Signature) Tina Harris Company ER



Enduring Resources, LLC

Recycling Facility Inspection Sheet

SITE INFORMATION

Location Name NEU 2207 16B Permit Number SJ-4301 Pad 1
 Section 16 Township 22N Range 7W County San Juan State NM
 Time Inspection Began 10:04 Time Inspection Ended 11:00
 Recycling Facility Recycling Containment Water Level (Feet) 18

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Lower Leak Detection (LLD)

Water Present in ULD? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	Water Present in ULD? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
Total Depth of ULD (ft) <u>79.85</u>	Total Depth of LLD (ft) <u>77.1</u>
Depth to Water in ULD (ft) <u>79.85</u>	Depth to Water in LLD (ft) <u>77.1</u>
Height of Water in ULD <u>0.00</u>	Height of Water in LLD <u>0</u>
Gallons of Water Removed <u>0</u>	Gallons of Water Removed <u>0</u>

If leak detection contained liquid, was it removed?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
If leak detection contained liquid, was HSE notified?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

No water to remove

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Name (Print) Tina Harris Date 9-23-20

Name (Signature) *Tina Harris* Company ER



Enduring Resources, LLC

Recycling Facility Inspection Sheet

SITE INFORMATION

Location Name NEU 2207-16B Permit Number SD-4301 Pod 1
 Section 26 Township 22N Range 7W County Sandwich State MA
 Time Inspection Began 10:45 Time Inspection Ended 11:15
 Recycling Facility Recycling Containment Water Level (Feet) 18

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

INSPECTION INFORMATION FOR RECYLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)				Lower Leak Detection (LLD)					
Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
Total Depth of ULD (ft)	<u>79.85</u>			Total Depth of LLD (ft)	<u>77.1</u>				
Depth to Water in ULD (ft)	<u>79.85</u>			Depth to Water in LLD (ft)	<u>77.1</u>				
Height of Water in ULD	<u>0</u>			Height of Water in LLD	<u>0</u>				
Gallons of Water Removed	<u>0</u>			Gallons of Water Removed	<u>0</u>				

If leak detection contained liquid, was it removed?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
If leak detection contained liquid, was HSE notified?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

No water to remove

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Name (Print) Tina Harris Date 10-1-20

Name (Signature) *Tina Harris* Company ER



Enduring Resources, LLC

Recycling Facility Inspection Sheet

SITE INFORMATION

Location Name NEU 2207-16B Permit Number SJ-4301 Pad 1
 Section 24 Township 22N Range 7W County Sandoval State NM
 Time Inspection Began 10:12 Time Inspection Ended 10:36
 Recycling Facility Recycling Containment Water Level (Feet) 18

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Lower Leak Detection (LLD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
Total Depth of ULD (ft)				<u>79.85</u>
Depth to Water in ULD (ft)				<u>79.85</u>
Height of Water in ULD				<u>0</u>
Gallons of Water Removed				<u>0</u>

Water Present in LLD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
Total Depth of LLD (ft)				<u>77.1</u>
Depth to Water in LLD (ft)				<u>77.1</u>
Height of Water in LLD				<u>0</u>
Gallons of Water Removed				<u>0</u>

If leak detection contained liquid, was it removed? YES NO NA
 If leak detection contained liquid, was HSE notified? YES NO NA

COMMENTS

No water to remove

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Name (Print) Tim Harris Date 10-7-20
 Name (Signature) [Signature] Company ER



Enduring Resources, LLC

Recycling Facility Inspection Sheet

SITE INFORMATION

Location Name NEU 2207-16B Permit Number SJ-4301 Pod 1
 Section 26 Township 22N Range 7W County Sandoval State NM
 Time Inspection Began 8:35 Time Inspection Ended 9:15
 Recycling Facility Recycling Containment Water Level (Feet) 18 ft.

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Lower Leak Detection (LLD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	Water Present in LLD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
Total Depth of ULD (ft)			<u>79.85</u>		Total Depth of LLD (ft)			<u>77.1</u>	
Depth to Water in ULD (ft)			<u>79.85</u>		Depth to Water in LLD (ft)			<u>77.1</u>	
Height of Water in ULD			<u>0</u>		Height of Water in LLD			<u>0</u>	
Gallons of Water Removed			<u>0</u>		Gallons of Water Removed			<u>0</u>	

If leak detection contained liquid, was it removed?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
If leak detection contained liquid, was HSE notified?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

No water to remove

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Name (Print) Tina Harris

Date 10-13-20

Name (Signature) Tina Harris

Company ER



Enduring Resources, LLC

Recycling Facility Inspection Sheet

SITE INFORMATION

Location Name NEU 2207-116B Permit Number 4301 Pod 1
 Section 16 Township 22N Range 7W County Sandoval State NM
 Time Inspection Began 10:22 Time Inspection Ended 11:00
 Recycling Facility Recycling Containment Water Level (Feet) 18 ft

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Lower Leak Detection (LLD)

Water Present in ULD? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Water Present in LLD? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
Total Depth of ULD (ft) <u>79.85</u>	Total Depth of LLD (ft) <u>77.1</u>
Depth to Water in ULD (ft) <u>79.85</u>	Depth to Water in LLD (ft) <u>77.1</u>
Height of Water in ULD <u>0</u>	Height of Water in LLD <u>0</u>
Gallons of Water Removed <u>0</u>	Gallons of Water Removed <u>0</u>

If leak detection contained liquid, was it removed?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
If leak detection contained liquid, was HSE notified?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

No water to remove

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Name (Print) Ana Harris

Date 10-22-20

Name (Signature) *[Signature]*

Company ER



Enduring Resources, LLC

Recycling Facility Inspection Sheet

SITE INFORMATION

Location Name NEU 2267-16B Permit Number _____
 Section 26 Township 22N Range 7W County Sandoval State NM
 Time Inspection Began 11:35 Time Inspection Ended 12:02
 Recycling Facility Recycling Containment Water Level (Feet) 18

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)				Lower Leak Detection (LLD)					
Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
Total Depth of ULD (ft)		<u>79.85</u>		Total Depth of LLD (ft)		<u>77.1</u>			
Depth to Water in ULD (ft)		<u>0</u>		Depth to Water in LLD (ft)		<u>0</u>			
Height of Water in ULD		<u>0</u>		Height of Water in LLD		<u>0</u>			
Gallons of Water Removed		<u>0</u>		Gallons of Water Removed		<u>0</u>			

If leak detection contained liquid, was it removed?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
If leak detection contained liquid, was HSE notified?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Bird call is down due to capstone being ~~in~~ down
 text Andy

Name (Print) Tina Harris

Date 10-30-20

Name (Signature) [Signature]

Company ER



Enduring Resources, LLC

Recycling Facility Inspection Sheet

SITE INFORMATION

Location Name NEU 2207-1613 Permit Number SJ-4301-Per 1
 Section 26 Township 22N Range 7W County Sandoval State NM
 Time Inspection Began 12:45 Time Inspection Ended 1:15
 Recycling Facility Recycling Containment Water Level (Feet) 18 ft

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
Total Depth of ULD (ft)		<u>79.85</u>		
Depth to Water in ULD (ft)		<u>79.05</u>		
Height of Water in ULD		<u>0</u>		
Gallons of Water Removed		<u>0</u>		

Lower Leak Detection (LLD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
Total Depth of LLD (ft)		<u>77.1</u>		
Depth to Water in LLD (ft)		<u>77.1</u>		
Height of Water in LLD		<u>0</u>		
Gallons of Water Removed		<u>0</u>		

If leak detection contained liquid, was it removed?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
If leak detection contained liquid, was HSE notified?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

No water to remove

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Capstone is down, contacted operator.

Name (Print) Tina Harris

Date 11-4-20

Name (Signature) *Tina Harris*

Company ER



Enduring Resources, LLC

Recycling Facility Inspection Sheet

SITE INFORMATION

Location Name NEU 2207-16B Permit Number SJ-4301 Pad 1
 Section 6e Township 22N Range 7W County Sandoval State NM
 Time Inspection Began 7:49 Time Inspection Ended 8:12
 Recycling Facility Recycling Containment Water Level (Feet) 18 ft

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Lower Leak Detection (LLD)

Water Present in ULD?	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
Total Depth of ULD (ft)		<u>79.85</u>			Total Depth of LLD (ft)		<u>77.1</u>		
Depth to Water in ULD (ft)		<u>79.8</u>			Depth to Water in LLD (ft)		<u>77.1</u>		
Height of Water in ULD		<u>.05</u>			Height of Water in LLD		<u>0</u>		
Gallons of Water Removed		<u>0</u>			Gallons of Water Removed		<u>0</u>		

If leak detection contained liquid, was it removed?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
If leak detection contained liquid, was HSE notified?	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

Not enough water to remove

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Name (Print) Tina Harris Date 11-11-20
 Name (Signature) [Signature] Company ER



Enduring Resources, LLC

Recycling Facility Inspection Sheet

SITE INFORMATION

Location Name NEU 2207-16B Permit Number _____
 Section 16 Township 22N Range 7W County Sandoval State NM
 Time Inspection Began 11:14 Time Inspection Ended 12:00
 Recycling Facility Recycling Containment Water Level (Feet) 18ft

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

INSPECTION INFORMATION FOR RECYLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)				Lower Leak Detection (LLD)			
Water Present in ULD?	YES	<input checked="" type="checkbox"/>	NO	Water Present in ULD?	YES	<input type="checkbox"/>	NO
Total Depth of ULD (ft)	<u>79.85</u>			Total Depth of LLD (ft)	<u>77.1</u>		
Depth to Water in ULD (ft)	<u>79.8</u>			Depth to Water in LLD (ft)	<u>77.1</u>		
Height of Water in ULD	<u>0.05</u>			Height of Water in LLD	<u>0</u>		
Gallons of Water Removed	<u>0</u>			Gallons of Water Removed	<u>0</u>		

If leak detection contained liquid, was it removed?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input checked="" type="checkbox"/>
If leak detection contained liquid, was HSE notified?	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

Not enough water to remove

BIRD MITIGATION SYSTEM

Audio Bird Deterants are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterants are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Name (Print) Tina Harris

Date 11-18-20

Name (Signature) *Tina Harris*

Company ER



Enduring Resources, LLC

Recycling Facility Inspection Sheet

SITE INFORMATION

Location Name NEU 2207-16B Permit Number 4301-Pod 1
 Section 24 Township 22N Range 7W County Sandoval State NM
 Time Inspection Began 10:37 Time Inspection Ended 11:00
 Recycling Facility Recycling Containment Water Level (Feet) 18ft

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawl of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Lower Leak Detection (LLD)

Water Present in ULD? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Water Present in LLD? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
Total Depth of ULD (ft) <u>79.85</u>	Total Depth of LLD (ft) <u>77.1</u>
Depth to Water in ULD (ft) <u>79.85</u>	Depth to Water in LLD (ft) <u>77.1</u>
Height of Water in ULD <u>0</u>	Height of Water in LLD <u>0</u>
Gallons of Water Removed <u>0</u>	Gallons of Water Removed <u>0</u>

If leak detection contained liquid, was it removed?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
If leak detection contained liquid, was HSE notified?	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

No water enough to remove

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Replace to one bird eye

Name (Print) Tina Harris

Date 11-24-20

Name (Signature) Tina Harris

Company ER



Enduring Resources, LLC

Recycling Facility Inspection Sheet

SITE INFORMATION

Location Name NEU 2207-16B Permit Number 4301-Pod 1
 Section 36 Township 22N Range 7W County Sandoval State NM
 Time Inspection Began 11:57 Time Inspection Ended _____
 Recycling Facility Recycling Containment Water Level (Feet) 18ft

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

INSPECTION INFORMATION FOR RECYLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawl of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Lower Leak Detection (LLD)

Water Present in ULD? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Water Present in ULD? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
Total Depth of ULD (ft) <u>79.85</u>	Total Depth of LLD (ft) <u>77.1</u>
Depth to Water in ULD (ft) <u>79.85</u>	Depth to Water in LLD (ft) <u>77.1</u>
Height of Water in ULD <u>0</u>	Height of Water in LLD <u>0</u>
Gallons of Water Removed <u>0</u>	Gallons of Water Removed <u>0</u>

If leak detection contained liquid, was it removed? YES NO NA
 If leak detection contained liquid, was HSE notified? YES NO NA

COMMENTS

No water to remove

BIRD MITIGATION SYSTEM

Audio Bird Deterants are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterants are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Name (Print) Tina Harris

Date 12-4-20

Name (Signature) Tina Harris

Company ER



Enduring Resources, LLC

Recycling Facility Inspection Sheet

SITE INFORMATION

Location Name NEU 2207-16B Permit Number 4301-Pod 1
 Section Ue Township 22N Range 9W County Sandoval State NM
 Time Inspection Began 8:51 Time Inspection Ended 9:21
 Recycling Facility Recycling Containment Water Level (Feet) 18ft

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)				Lower Leak Detection (LLD)					
Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	Water Present in LLD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
Total Depth of ULD (ft)	<u>79.85</u>			Total Depth of LLD (ft)	<u>77.1</u>				
Depth to Water in ULD (ft)	<u>79.85</u>			Depth to Water in LLD (ft)	<u>77.1</u>				
Height of Water in ULD	<u>0</u>			Height of Water in LLD	<u>0</u>				
Gallons of Water Removed	<u>0</u>			Gallons of Water Removed	<u>0</u>				

If leak detection contained liquid, was it removed?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
If leak detection contained liquid, was HSE notified?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

No water to remove

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Replaced 2 bird eyes

Name (Print) Tina Harris Date 12-10-20
 Name (Signature) [Signature] Company ER



Enduring Resources, LLC

Recycling Facility Inspection Sheet

SITE INFORMATION

Location Name NE4 2207 16B Permit Number 4301-Pod 1
 Section 16 Township 22N Range 9W County Sandaval State NM
 Time Inspection Began 11:37 Time Inspection Ended 12:15
 Recycling Facility Recycling Containment Water Level (Feet) 18 ft

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Lower Leak Detection (LLD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
Total Depth of ULD (ft)		<u>79.8</u>			Total Depth of LLD (ft)		<u>77.1</u>		
Depth to Water in ULD (ft)		<u>79.8</u>			Depth to Water in LLD (ft)		<u>77.1</u>		
Height of Water in ULD		<u>0</u>			Height of Water in LLD		<u>0</u>		
Gallons of Water Removed		<u>0</u>			Gallons of Water Removed		<u>0</u>		

If leak detection contained liquid, was it removed?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
If leak detection contained liquid, was HSE notified?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

No water to remove

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Name (Print) Tim Harris

Date 12-16-20

Name (Signature) [Signature]

Company ER