District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Avenue, Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fc, 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-144 CLEZ July 21, 2008

For closed-loop systems that only use above ground steel tanks or haul-off blus and propose to implement waste removal for closure, submit to the appropriate NMOCD District Office.

Closed-Loop System Permit or Closure Plan Application

Closed-Loop System Fermit of Closure Fran Application				
(that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure)				
Type of action: X Permit Closure				
Instructions: Please submit one application (Form C-144 CLEZ) per individual closed closed-loop system that only use above ground steel tanks or haul-off bins and propose	to Implement waste	removal for clo	sure, please submit a Form C-144.	
Please be advised that approval of this request does not relieve the operator of liability shoul environment. Nor does approval relieve the operator of its responsibility to comply with any	ld operations result y other applicable g	in pollution of su overnmental autl	nface writer ground water or the prity of the prity of the face of	
Operator: RKI Exploration and Production, LLC	OGRID#:	246289	MAR 22 2012	
Address: 3817 NW Expressway, Suite 950, Oklahoma City, OK 73112		į	Allan	
Facility or well name: RDX 16-4	2	1222	NMOCD ARTESIA	
API Number: 30-015-39750 OCD Perm	it Number: 2	4190		
U/L or Qtr/Qtr: A Section: 16 Township: 26S	Range: 30E	County: Ed	dy	
Center of Proposed Design: Latitude 32°02'56.38"N Longitude 10)3°52′51.12″W	NΛ	D: []1927 X 1983	
Surface Owner: Tederal: State Private Tribal Trust or Indian Allotment				
Z. Subsection H of 19.15,17.11 NMAC				
Operation: X Drilling a new well Workover or Drilling (Applies to activities which require prior approval of a permit or notice of intent) P&A Above Ground Steel Tanks or X Haul-off Bins				
3.				
Signs: Subsection C of 19.15.17.11 NMAC				
12"x 24", 2" lettering, providing Operator's name, site location, and emergency telephone numbers Signed in compliance with 19.15.3.103 NMAC				
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 documents are attached. X Design Pian - based upon the appropriate requirements of 19.15.17.11 NMAC X Operating and Maintenance Pian - based upon the appropriate requirements of 19.15.17.12 NMAC X Closure Pian (Please complete Box 5) - 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:		-		
Previously Approved Operating and Maintenance Plan API Number:		-		
Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Ste Instructions: Please Indentify the facility or facilities for the disposal of liquids, drift	al Taulia au Haul	off Rine Only		
facilities are required.				
*		ll cuttings. Use	attachment if more than two	
Disposal Facility Name: Controlled Recovery Incorporated (CRI) Di	lling fluids and dr	<i>II cuttings. Use</i> mit Number: R	attachment if more than two -9166	
Disposal Facility Name: Controlled Recovery Incorporated (CRI) Disposal Facility Name: Di Will any of the proposed closed-loop system operations and associated activities occur Yes (If yes, please provide the information below) No	<i>lling fluids and dr</i> sposal Facility Per sposal Facility Per	III cuttings. Use mit Number: R mit Number:	attachment if more than two -9166	
Disposal Facility Name: Controlled Recovery Incorporated (CRI) Disposal Facility Name: Disposal Facil	sposal Facility Per sposal Facility Per on or in areas that quirements of Sub- f 19.15.17.13 NM.	ill cuttings. Use mit Number: R mit Number: t will not be used section H of 19.	attachment if more than two -9166 d for future service and operations?	
Disposal Facility Name: Controlled Recovery Incorporated (CRI) Disposal Facility Name: Disposal Facil	sposal Facility Per sposal Facility Per on or in areas that quirements of Sub- f 19.15.17.13 NM.	ill cuttings. Use mit Number: R mit Number: t will not be used section H of 19.	attachment if more than two -9166 d for future service and operations?	
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Disposal Facility Name: Controlled Recovery Incorporated (CRI) Disposal Facility Name: Disposal Facil	sposal Pacifity Per sposal Facility Per on or in areas that quirements of Subs f 19.15.17.13 NM. G of 19.15.17.13 and complete to the	mit Number: R mit Number: best of my know	attachment if more than two -9166 d for future service and operations?	

e-mail address: specialtpermitting@gmail.com

Telephone: 575-361-4078

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OCD Approval: Permit Application (including closure plan) Closure P	lan (only)	
OCD Representative Signature:	Approval Date: 03/30/12	
Title: DIST # Supervision	OCD Permit Number: 212723	
Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC Instructions: Operators are required to obtain an approved closure plan prior to implementing any closure activities and submitting the closure report. The closure report is required to be submitted to the division within 60 days of the completion of the closure activities. Please do not complete this section of the form until an approved closure plan has been obtained and the closure activities have been completed. □ Closure Completion Date:		
Closure Report Regarding Waste Removal Closure For Closed-loop Systems Instructions: Please indentify the facility or facilities for where the liquids, dril two facilities were utilized.		
Disposal Facility Name:	Disposal Facility Permit Number:	
Disposal Facility Name:	Disposal Facility Permit Number:	
Were the closed-loop system operations and associated activities performed on or in areas that will not be used for future service and operations? Yes (If yes, please demonstrate compliance to the items below) No		
Required for Impacted areas which will not be used for future service and operati Site Reclamation (Photo Documentation) Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique	ons:	
Operator Closure Certification: I hereby certify that the information and attachments submitted with this closure report is true, accurate and complete to the best of my knowledge and belief. I also certify that the closure complies with all applicable closure requirements and conditions specified in the approved closure plan.		
Name (Print):	Title:	
Signature:		
e-mail address:	Telephone:	

Found 111 (117)

RKI Exploration and Production 3817 N. W. Expressway, Suite 950 Oklahoma City, OK. 73112

Closed Loop System

Design Plan

Equipment List

- 2-414 Swaco Centrifuges
- 2-4 screen Mongoose shale shakers
- 2-250 bbl. tanks to hold fluid
- 2 CRI Bins with track system
- 2 500 bbl. frac tanks for fresh water
- 2-500 bbl. frac tanks for brine water

Operation and Maintenance

- Closed Loop equipment will be inspected daily by each tour and any necessary maintenance performed
- · Any leak in system will be repaired and/or contained immediately
- . OCD notified within 48 hours
- Remediation process started

Closure Plan

During drilling operations, all liquids, drilling fluids and cuttings will be hauled off via CRI (Controlled Recovery Incorporated). Permit #: R-9166.