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-144 CLEZ Revised August 1, 2011

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

## Closed-Loop System Permit or Closure Plan Application

(that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure)

Type of action: Permit Closure

Instructions: Please submit one application (Form C-144 CLEZ) per individual closed-loop system request. For any application request other than for a closed-loop system that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure, please submit a Form C-144.

Please 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

environment. Nor does approval relieve the operator of its responsibility to comply with	any other applicable governmental author	ity's fules, regulations of ordinances.
Operator: Yates Petroleum Corporation	OGRID #: 025575	
Address: 105 South 4th St. Artesia, NM 88210		······································
Facility or well name: Antweil ANU Federal #2H		
API Number: 30-015-40425 OCD I	Permit Number: 213124	
U/L or Qtr/Qtr O Section 30 Township 198	Range 30E County: Eddy	
Center of Proposed Design: Latitude N 32.639589 Lc	ongitude <u>W 104.005502</u>	NAD: □1927 ⊠ 1983
Surface Owner: 🛮 Federal 🗌 State 🔲 Private 🗍 Tribal Trust or Indian Allotmo	ent	
2.  □ Closed-loop System: Subsection H of 19.15.17.11 NMAC  Operation: □ Drilling a new well □ Workover or Drilling (Applies to activities  □ Above Ground Steel Tanks or □ Haul-off Bins	which require prior approval of a permi	t or notice of intent) P&A
3.  Signs: Subsection C of 19.15.17.11 NMAC  ☐ 12"x 24", 2" lettering, providing Operator's name, site location, and emergence  Signed in compliance with 19.15.16.8 NMAC	by telephone numbers	APR 2 2012
Closed-loop Systems Permit Application Attachment Checklist: Subsection Instructions: Each of the following items must be attached to the application. attached.  Design Plan - based upon the appropriate requirements of 19.15.17.11 NM. Operating and Maintenance Plan - based upon the appropriate requirements. Closure Plan (Please complete Box 5) - based upon the appropriate requirements. Previously Approved Design (attach copy of design) API Number: Previously Approved Operating and Maintenance Plan API Number:	Please indicate, by a check mark in the AC s of 19.15.17.12 NMAC ments of Subsection C of 19.15.17.9 NM	
Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Instructions: Please indentify the facility or facilities for the disposal of liquids facilities are required.  Disposal Facility Name Gandy Marley		ittachment if more than two
Disposal Facility Name: CRI	Disposal Facility Permit Number: R-1	
Disposal Facility Name: <u>Lea Land Farm</u>	Disposal Facility Permit Number: WM	
Disposal Facility Name: Sundance Services Inc.	Disposal Facility Permit Number: NN	<u>4 - 01-0003</u>
Will any of the proposed closed-loop system operations and associated activities of Yes (If yes, please provide the information below) ☒ No	occur on or in areas that will not be used	for future service and operations?
Required for impacted areas which will not be used for future service and operation Soil Backfill and Cover Design Specifications based upon the appropriate Re-vegetation Plan - based upon the appropriate requirements of Subsection Site Reclamation Plan - based upon the appropriate requirements of Subsection	te requirements of Subsection H of 19.1: n I of 19.15.17.13 NMAC	5.17.13 NMAC

6.	
Operator Application Certification:	
I hereby certify that the information submitted with this application is true, accu	·
Name (Print): <u>Travis Hahn</u>	
Signature: 7/1/h	Date: <u>3/29/2012</u>
e-mail address. thahn@yatespetroleum.com	Telephone: <u>575-748-4120</u>
7. OCD Approval: Permit Application (including closure plan)  Closure	Plan (only)
OCD Representative Signature:	Approval Date: 6/28/2012
Title: D157 H Superner	Approval Date: 6/28/2012  OCD Permit Number: 2/3/12 \
8. Closure Report (required within 60 days of closure completion): Subsection Instructions: Operators are required to obtain an approved closure plan prior The closure report is required to be submitted to the division within 60 days of section of the form until an approved closure plan has been obtained and the complete the submitted to the division within 60 days of section of the form until an approved closure plan has been obtained and the complete the submitted to the division within 60 days of section of the form until an approved closure plan has been obtained and the complete the submitted to the division within 60 days of closure completion):	to implementing any closure activities and submitting the closure report.  The completion of the closure activities. Please do not complete this
9.	
Closure Report Regarding Waste Removal Closure For Closed-loop System Instructions: Please indentify the facility or facilities for where the liquids, dr 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 $\square$ Yes (If yes, please demonstrate compliance to the items below) $\square$ No	or in areas that will not be used for future service and operations?
Required for impacted areas which will not be used for future service and opera  Site Reclamation (Photo Documentation)  Soil Backfilling and Cover Installation  Re-vegetation Application Rates and Seeding Technique	tions:
10. Operator Closure Certification:	
I hereby certify that the information and attachments submitted with this closure belief. I also certify that the closure complies with all applicable closure require	
Name (Print):	Title:
Signature:	Date:
e-mail address:	Telephone:

DISTRICT I 1625 N. French Dr., Hobbs, NM 88240 Phone (575) 393-6161 Pax: (575) 393-0720 DISTRICT II 1301 W. Grand Avenue, Artesia, NM 88210 Phone (575) 748-1283 Fax: (575) 748-9720

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 Phone (505) 334-6178 Fax: (505) 334-6170

DISTRICT IV 1220 S. St. Francis Dr., Santa Fe, NM 87505 Phone (505) 476-3460 Fax: (505) 476-3462

State of New Mexico Energy, Minerals and Natural Resources Department

RECEIVED Revised August 1, 2011 2 Submit one copy to appropriate District Office

Form C-102

OIL CONSERVATION DIVISION

Santa Fe, New Mexico 87505 NMOCD ARTESIA

□ AMENDED REPORT

#### WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number	Pool Code	Pool Name 2nd Bone Springs Sand/Wildcat		
Property Code	Prop ANTWEIL "/	Well Number 3H		
ogrid No. 025575	Oper YATES PETI	Elevation 3344'		

#### Surface Location

UL or lot 1	o. Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
0	19	19 S	30 E		330	SOUTH	1980	EAST	EDDY

### Bottom Hole Location If Different From Surface

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
В	19	19 S	30 E		330	NORTH	1980	EAST	EDDY
Dedicated Acres   Joint or Infill   Consolidation Code			Code Or	der No.					
160									

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

