District 1 1625 N. French Dr., Hobbs, NM 88240 District II 1301 W. Grand Avenue, Artesia, NM 88210 District III 1000 Rio Brazos Road, Aziec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico **Energy Minerals and Natural Resources**

Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505

For drilling and production facilities, submit to appropriate NMOCD District Office.
For downstream facilities, submit to Santa Fe

Form C-144 June 1, 2004

office

Is pit or below-grade tar	ade Tank Registration or Clost the covered by a "general plan"? Yes Nor below-grade tank Closure of a pit or below-gr	<u>Ire</u> o □ rade tank
Operator: _Preston ExplorationTelephone: _281-367-8697 Address:POB 7520 The Woodlands, TX 77687 Facility or well name: _Palms 20 Fed Com #1API #: 30-015-3358 County:Eddy Latitude32° 38'50.74"N_ Longitude _104°18'10.72' Surface Owner: Federal 🖾 State Private Indian		S BECEIVED
Pit Type: Drilling ⊠ Production □ Disposal □ Workover □ Emergency □ Lined ⊠ Unlined □ Liner type: Synthetic ⊠ Thickness12_mil Clay □ Pit Volumebbl	Below-grade tank Volume:bbl Type of fluid: Construction material: Double-walled, with leak detection? Yes 1f not, explain why not.	
Depth to ground water (vertical distance from bottom of pit to seasonal high water elevation of ground water.)	Less than 50 feet 50 feet or more, but less than 100 feet 100 feet or more	(20 points) 20 (10 points) (0 points)
Wellhead protection area: (Less than 200 feet from a private domestic water source, or less than 1000 feet from all other water sources.)	Yes No	(20 points) (0 points)
Distance to surface water: (horizontal distance to all wetlands, playas, irrigation canals, ditches, and perennial and ephemeral watercourses.)	Less than 200 feet 200 feet or more, but less than 1000 feet 1000 feet or more	(20 points) (10 points) (0 points)
If this is a pit closure: (1) Attach a diagram of the facility showing the pit's relationship to other equipment and tanks. (2) Indicate disposal location: (check the onsite box if your are burying in place) onsite ☐ offsite ☒ if offsite, name of facility		
Thereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that the above-described pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ⊠, a general permit □, or an (attached) alternative OCD-approved plan □. Date: _11-28-06 Printed Name/Title _Angela Lightner_ Consultant Signature		
•	Signature Mile Semen	Date: 11/29/02
Confirmation samples required prior to bookfilling sit area - Notify OCD 24 hrs. Strir to obtaining samples		