State of	New Mexico
Autoria Autoria Energy Minerals 625 N. French Dr., Hobbs, NM 88240 Energy Minerals District III De Oil Conser Oil Conser 1220 South 1220 South	IncentionJune 24, 20and Natural ResourcesFor temporary pits, closed-loop systems, andpartmentbelow-grade tanks, submit to the appropriatevation DivisionNMOCD District Office.h St. Francis Dr.For permanent pits and exceptions submit to the Santa Fe Environmental Bureau office and provide a copy to the appropriate NMOCDe, NM 87505District Office.
OCD-ARTESIA Proposed Alternative Method Type of action: Permit of a pit, closed-loop s Closure of a pit, closed-loop Instructions: Please submit one application (Form C-144) per in	em, Below-Grade Tank, or JUL - 9 2008 Permit or Closure Plan Application OCDARTESIA ystem, below-grade tank, or proposed alternative method system, below-grade tank, or proposed alternative method adividual pit, closed-loop system, below-grade tank or alternative request
ease be advised that approval of this request does not relieve the operator of his vironment. Nor does approval relieve the operator of its responsibility to com	ability should operations result in pollution of surface water, ground water or the ply with any other applicable governmental authority's rules, regulations or ordinance
Operator: Nadel and Gussman Permian,LLC Address: 601 N. Marienfeld, Ste 508 Midland, TX 7970 Facility or well name: Hannibal Fee #2 API Number: 30-015-36307000)1
U/L or Qtr/QtrCSection31Township	228Range28ECounty:Eddy LongitudeN/ANAD: []1927 [] 1983
Pit: Subsection F or G of 19.15.17.11 NMAC Temporary: Drilling Workover Permanent Emergency Cavitation Steel Pit Lined Unlined Liner type: Thickness mil LLDPE HDPE PVC Other	Image: Subsection H of 19.15.17.11 NMAC Image: Drying Pad Image: Tanks Image: Haul-off Bins Other Image: Lined Unlined Image: Thickness mil Image: Luppe HDPE PVC Image: Discrete Seams: Image: Welded Factory Other Image: Discrete Seams yd³ Image: Volume:
Below-grade tank: Subsection I of 19.15.17.11 NMAC Volume: bbl Type of fluid: Tank Construction material:	Fencing: Subsection D of 19.15.17.11 NMAC Chain link, six feet in height, two strands of barbed wire at top Four foot height, four strands of barbed wire evenly spaced between one a four feet Netting: Subsection E of 19.15.17.11 NMAC. Screen Netting Other Monthly inspections
Visible sidewalls only Other Liner type: Thickness Other Other Alternative Method:	Signs: Subsection C of 19.15.17.11 NMAC 12'x24', 2' lettering, providing Operator's name, site location, and emergency telephone numbers Signed in compliance with 19.15.3.103 NMAC
Submittal of an exception request is required. Exceptions must be submitted to the Santa Fe Environmental Bureau office for consideration of approval.	Administrative Approvals and Exceptions: Justifications and/or demonstrations of equivalency are required. Please refer 19.15.17 NMAC for guidance. Please check a box if one or more of the following is requested; if not leave blank: Administrative approval(s): Requests must be submitted to the appropriate division district or the Santa Fc Environmental Bureau office for consideration of approval. Exception(s): Requests must be submitted to the Santa Fc

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Siting Criteria (regarding permitting): Instructions: The applicant must demon acceptable source material are provided approval from the appropriate district of Environmental Bureau office for consid 19.15.17.10 NMAC for guidance. Siting loop system.	strate compliance for each siting criteri below. Requests regarding changes to c fice or may be considered an exception eration of approval. Applicant must atta	ertain siting criteria may require ad which must be submitted to the Sant ach justification for request. Please	ministrative a Fe refer to	
Ground water is less than 50 feet below th - NM Office of the State Engineer	e bottom of the temporary pit, permanen - iWATERS database search; USGS; Dat			Yes 🗋
Within 300 feet of a continuously flowing lake (measured from the ordinary high-wa - Topographic map; Visual inspect		gnificant watercourse or lakebed, sin	chole, or playa	🗌 Yes 🗌
Within 300 feet from a permanent resider (Applies to temporary, emergency, or cav Visual inspection (certification) of			4 F	Yes I NA
Within 1000 feet from a permanent reside (Applies to permanent pits) - Visual inspection (certification) of	ence, school, hospital, institution, or chur of the proposed site; Aerial photo; Satellit			☐ Yes ☐ ☐ NA
Within 500 horizontal feet of a private, do watering purposes, or within 1000 horizo - NM Office of the State Engineer		spring, in existence at the time of init	ial application.	Yes 🗌
Within incorporated municipal boundarie adopted pursuant to NMSA 1978, Section - Written confirmation or verificati	s or within a defined municipal fresh wat a 3-27-3, as amended. Ion from the municipality; Written appro		bal ordinance	🗌 Yes 🗌 🗄
Within 500 feet of a wetland. - US Fish and Wildlife Wetland Id	entification map; Topographic map; Visu	ual inspection (certification) of the pro-		🗋 Yes 🗍
Within the area overlying a subsurface m - Written confirmation or verificati	ine. ion or map from the NM EMNRD-Minin	g and Mineral Division		🗌 Yes 🗌
Within an unstable area. - Engineering measures incorporat Society; Topographic map	ed into the design; NM Bureau of Geolog	gy & Mineral Resources; USGS; NM		🗌 Yes 📝
Within a 100-year floodplain. - FEMA map				Yes 🗌
 Hydrogeologic Data (Temporary ai Siting Criteria Compliance Demons Design Plan - based upon the appro Operating and Maintenance Plan - I 		Please indicate, by a check mark in t of Paragraph (4) of Subsection B of I urements of Paragraph (2) of Subsect urements of 19.15.17.10 NMAC AC of 19.15.17.12 NMAC	<i>he box, that the doc</i> 9.15.17.9 NMAC tion B of 19.15.17.9	cuments are
Previously Approved Design (attach	copy of design) API Number:	or Permit Nun	ıber:	•
 Siting Criteria Compliance Demon Design Plan - based upon the appro Operating and Maintenance Plan - 	on Attachment Checklist: Subsection E as must be attached to the application. If (required for on-site closure) - based upon strations (required for on-site closure) - h opriate requirements of 19.15.17.11 NMA based upon the appropriate requirements ropriate requirements of Subsection C of	Please indicate, by a check mark in t on the requirements of Paragraph (3) based upon the appropriate requirement AC of 19.15.17.12 NMAC	of Subsection B of ents of 19.15.17.101	19.15.17.9
Previously Approved Design (attach	copy of design) API Number:		, *	۰
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Permanent Pits Permit Application 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 do attached.	cuments are
arrachea. Hydrogeologic Report - based upon the requirements of Paragraph (1) of Subsection B of 19.15.17.9 NMAC Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC, Climatological Factors Assessment Certified Engineering Design Plans - based upon the appropriate requirements of 19.15.17.11 NMAC Dike Protection and Structural Integrity Design - based upon the appropriate requirements of 19.15.17.11 NMAC Leak Detection Design - based upon the appropriate requirements of 19.15.17.11 NMAC Quality Control/Quality Assurance Construction and Installation Plan Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.11 NMAC Freeboard and Overtopping Prevention Plan - based upon the appropriate requirements of 19.15.17.11 NMAC Musance or Hazardous Odors, including H ₂ S, Prevention Plan Errosion Control Plan Oil Field Waste Stream Characterization Monitoring and Inspection Plan Erosion Control Plan Closure Plan - based upon the appropriate requirement Pit Below-grade Tank & Closed-loop System Proposed Closure 19.15.17.13 NMAC Proposed Closure Method: Workover] Alternative
Waste Removal (Closed-loop systems only)	
 On-site Closure Method (Only for temporary pits and closed-loop systems) In-place Burial On-site Trench Burial 	
Alternative Closure Method (Exceptions must be submitted to the Santa Fe Environmental Bureau for con	nsideration)
Siting Criteria (regarding on-site closure methods only): 19.15.17.10 NMAC Instructions: Each siting criteria requires a demonstration of compliance in the closure plan. Recommendations of acceptable source material are provided below. Requests regarding changes to certain siting criteria may require administrative approval from the appropriate district office or may be considered an exception which must be submitted to the Santa Fe Environmental Bureau office for consideration of approval. Justifications and/or demonstrations of equivalency are required. Please refer to 19.15.17.10 NMAC for guidance.	
Ground water is less than 50 feet below the bottom of the buried waste. - NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells	☐ Yes ☐ No ☐ NA
Ground water is between 50 and 100 feet below the bottom of the buried waste - NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells	☐ Yes ☐ No ☐ NA
Ground water is more than 100 feet below the bottom of the buried waste. - NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells	□ Yes □ No □ NA
 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 300 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 private, domestic fresh water well or spring that less than five households use for domestic or stock watering purposes, or within 1000 horizontal feet of any other fresh water well or spring, in existence at the time of initial application. - NM Office of the State Engineer - iWATERS database; Visual inspection (certification) of the proposed site	🗌 Yes 🗌 No
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
Within 500 feet of a wetland. - US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site	Yes No
Within the area overlying a subsurface mine. - Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division	Yes No
Within an unstable area. - Engineering measures incorporated into the design; NM Burcau of Gcology & Mineral Resources; USGS; NM Geological Society; Topographic map	Yes No
Within a 100-year floodplain. - FEMA map	🗋 Yes 🗌 No
Form C-144 Oil Conservation Division Page 3 of	4

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Waste Excavation and Removal Closure Plan Checklist: (19.15.17.13 NMAC) closure plan. Please indicate, by a check mark in the box, that the documents at Protocols and Procedures - based upon the appropriate requirements of 19.1 Confirmation Sampling Plan (if applicable) - based upon the appropriate requirements of 19.1 Disposal Facility Name and Permit Number (for liquids, drilling fluids and 0 Soil Backfill and Cover Design Specifications - based upon the appropriate Re-vegetation Plan - based upon the appropriate requirements of Subsectior Site Reclamation Plan - based upon the appropriate requirements of Subsection	<i>re attached.</i> 5.17.13 NMAC quirements of Subsection F of 19.15.17.13 NMAC drill cuttings). requirements of Subsection H of 19.15.17.13 NMAC 1 of 19.15.17.13 NMAC
Waste Removal Closure For Closed-loop Systems That Utilize Haul-off Bins (or facilities for the disposal of liquids, drilling fluids and drill cuttings.	
Disposal Facility Name:CRI	Disposal Facility Permit Number:R9166
On-Site Closure Plan Checklist: (19.15.17.13 NMAC) Instructions: Each of the by a check mark in the box, that the documents are attached. Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of Surface Owner Notice - based upon the appropriate requirements of Construction and Design of Burial Trench (if applicable) based upon the appropriate requirements of 19.1 Confirmation Sampling Plan (if applicable) - based upon the appropriate requirements of Disposal Facility Name and Permit Number (for liquids, drilling fluids and Soil Cover Design - based upon the appropriate requirements of Subsection Re-vegetation Plan - based upon the appropriate requirements of Subsection	quirements of 19.15.17.10 NMAC of Subsection F of 19.15.17.13 NMAC opropriate requirements of 19.15.17.11 NMAC 5.17.13 NMAC quirements of Subsection F of 19.15.17.13 NMAC f Subsection F of 19.15.17.13 NMAC drill cuttings or in case on-site closure standards cannot be achieved) H of 19.15.17.13 NMAC a I of 19.15.17.13 NMAC
Operator Application Certification:	
I hereby certify that the information submitted with this application is true, accurate	ate and complete to the best of my knowledge and belief.
Name (Print):Michelle Sena	Title:Regulatory Analyst
Signature. Michelli Sena	Date:07/03/08
	one:(432) 682-4429
OCD Approval: X Permit Application (including closure plan) Closure Pl	an (only)
OCD Representative Signature:	Approval Date: 7/15/08
OCD Representative Signature: Jem With Segments	Approval Date: <u>7/15/08</u> OCD Permit Number: <u>0208/08</u>
O'	0CD Permit Number: <u>0288/08</u>
Title:	0CD Permit Number: <u>0208/08</u>
Title:	OCD Permit Number: Closure Completion Date: 8-9-208 Image: Closure Method 1000000000000000000000000000000000000
Title:	OCD Permit Number: D208/08 K of 19.15.17.13 NMAC 8-9-2008 Closure Completion Date: 8-9-2008 tive Closure Method 1000000000000000000000000000000000000
Title:	OCD Permit Number: D208/08 K of 19.15.17.13 NMAC 8-9-2008 Closure Completion Date: 8-9-2008 tive Closure Method 1000000000000000000000000000000000000
Title:	OCD Permit Number: Closere Completion Date: 8-9-208 Image: Closere Method 1000000000000000000000000000000000000
Title:	OCD Permit Number: CZOS/OS K of 19.15.17.13 NMAC Closure Completion Date: 8-9-2008 tive Closure Method ems must be attached to the closure report. Please indicate, by a check
Title:	OCD Permit Number: CZOS/OS K of 19.15.17.13 NMAC Closure Completion Date: 8-9-2008 tive Closure Method ems must be attached to the closure report. Please indicate, by a check
Title:	OCD Permit Number: <u>CP08/08</u> K of 19.15.17.13 NMAC Closure Completion Date: <u>8-9-2008</u> tive Closure Method ems must be attached to the closure report. Please indicate, by a check
Title:	OCD Permit Number: <u>208/08</u> K of 19.15.17.13 NMAC Closure Completion Date: <u>8-9-2008</u> tive Closure Method ems: must be attached to the closure report. Please indicate, by a check
Title:	OCD Permit Number: <u>208/08</u> K of 19.15.17.13 NMAC Closure Completion Date: <u>8-9-2008</u> tive Closure Method ems: must be attached to the closure report. Please indicate, by a check
Title:	OCD Permit Number: OCD 8/08 K of 19.15.17.13 NMAC 8-9-2008 Closure Completion Date: 8-9-2008 tive Closure Method 8-9-2008 ems must be attached to the closure report. Please indicate, by a check ude
Title:	OCD Permit Number: OCD 8/08 K of 19.15.17.13 NMAC 8-9-2008 Closure Completion Date: 8-9-2008 tive Closure Method 8-9-2008 ems must be attached to the closure report. Please indicate, by a check ude
Title:	OCD Permit Number: OCD State K of 19.15.17.13 NMAC 8-9-2008 Closure Completion Date: 8-9-2008 tive Closure Method 8-9-2008 ems must be attached to the closure report. Please indicate, by a check ude NAD: 1927 1983 eport is true, accurate and complete to the best of my knowledge and tents and conditions specified in the approved closure plan.
Title:	OCD Permit Number: W K of 19.15.17.13 NMAC Closure Completion Date: 8-9-2008 tive Closure Method ems must be attached to the closure report. Please indicate, by a check ade
Title: Image: Closure Report (required within 60 days of closure completion): Subsection Closure Method: On-Site Closure Completion): Subsection If different from approved plan, please explain. Alterna If different from approved plan, please explain. Closure Report Attachment Checklist: Instructions: Each of the following ite mark in the box, that the documents are attached. Proof of Closure Notice Proof of Deed Notice (if applicable) Plot Plan Confirmation Sampling Analytical Results Waste Material Sampling Analytical Results Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique Site Reclamation (Photo Documentation) On-site Closure Location: Latitude Longith Operator Closure Certification: I hereby certify that the information and attachments submitted with this closure requirem Name (Print): I E R RY W E S T Signature: May Magad Magad	OCD Permit Number: $\bigcirc \bigcirc $

CLOSED-LOOP SYSTEM

Design Plan:



Operating and Maintenance Plan:

During drilling operations, third party service companies will utilize solids control equipment to remove cuttings from the drilling fluid and collect it in haul-off bins.

Closure Plan:

During drilling operations, third party service companies will haul-off drill solids and fluids to an approved disposal facility.