

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 Fe, NM 87505

State of New Mexico  
Energy Minerals and Natural Resources

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

Form C-144  
June 1, 2004

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

**Pit or Below-Grade Tank Registration or Closure**

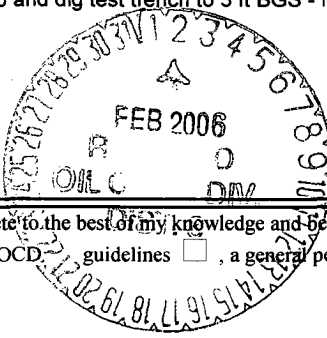
Is pit or below-grade tank covered by a "general plan"? Yes ☒ No ☐

WFS

Type of action: Registration of a pit or below-grade tank ☐ Closure of a pit or below-grade tank ☒

Operator: <u>SYNERGY OPERATING LLC</u>		Telephone:	e-mail address:	
Address: <u>PO BOX 5513 FARMINGTON, NM 874995513</u>				
Facility or well name: <u>CONOCO 29-4 #004</u>		API #: <u>30-039-20648</u>	U/L or Qtr/Qtr	N SEC <u>24</u> T <u>29N</u> R <u>4W</u>
County: <u>RIO ARRIBA</u>		Latitude <u>36.70609</u>	Longitude <u>-107.20994</u>	NAD: 1927 <input checked="" type="checkbox"/> 1983 <input type="checkbox"/>
Surface Owner: Federal <input checked="" type="checkbox"/> State <input type="checkbox"/> Private <input type="checkbox"/> Indian <input type="checkbox"/>				
<b>Pit</b> Type: Drilling <input type="checkbox"/> Production <input checked="" type="checkbox"/> Disposal <input type="checkbox"/> Workover <input type="checkbox"/> Emergency <input type="checkbox"/> Lined <input type="checkbox"/> Unlined <input checked="" type="checkbox"/> Liner Type: Synthetic <input checked="" type="checkbox"/> Thickness _____ mil Clay <input type="checkbox"/> Pit Volume <u>187</u> bbl		<b>Below-grade tank</b> Volume: _____ bbl Type of fluid: _____ Construction Material: _____ Double-walled, with leak detection? Yes <input type="checkbox"/> If 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) (10 points) <u>0</u> (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) <u>0</u>
Distance to surface water: (Horizontal distance to all wetlands, playas, irrigation canals, ditches, and perennial and ephemeral watercourses.)		Less than 200 feet 200 feet to 1,000 feet Greater than 1,000 feet		(20 points) (10 points) <u>0</u> (0 points)
		<b>Ranking Score (TOTAL POINTS):</b>		<u>0</u>

**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 you are burying in place) onsite ☒ offsite ☐ If offsite, name of facility \_\_\_\_\_. (3) Attach a general description of remedial action taken including remediation start date and end date. (4) Groundwater encountered: No ☒ Yes ☐ If yes, show depth below ground surface \_\_\_\_\_ ft. and attach sample results. (5) Attach soil sample results and a diagram of sample locations and excavations.

Additional Comments:	Meter: <u>85085</u>
Secondary containment with fiberglass tub - removed tub and dig test trench to 3 ft BGS - no evidence of hydrocarbon impacts - 0 ppm HS - no sample - return to grade	
	

I hereby 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: 1/31/06

Printed Name/Title Mark Harvey for Williams Field Services Signature Mark Harvey

Your certification and NMOCD approval of this application/closure does not relieve the operator of liability should the contents of the pit or tank contaminate ground water or otherwise endanger public health or the environment. Nor does it relieve the operator of its responsibility for compliance with any other federal, state, or local laws and/or regulations.

Approval:

Printed Name/Title DEPUTY OIL & GAS INSPECTOR, DIST. III

Signature Henry Faust

Date: FEB 02 2006

## ADDENDUM TO OCD FORM C-144

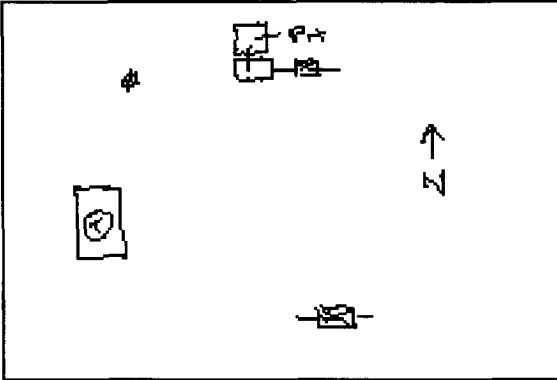
**Operator:** SYNERGY OPERATING LLC

**API** 30-039-20648

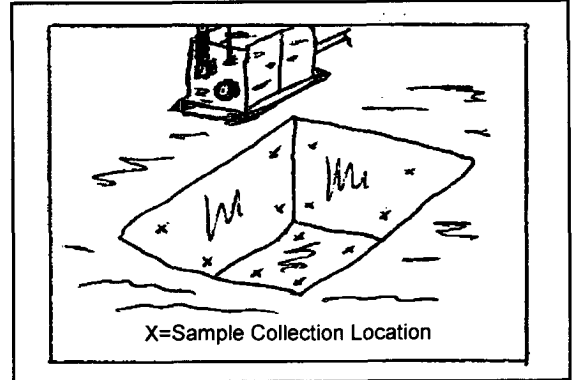
**Well Name:** CONOCO 29-4 #004

**Meter:** 85085

**Facility Diagram:**



**Sampling Diagram:**



**Pit Dimensions**

Length 30 Ft.

Width 14 Ft.

Depth 2.5 Ft.

**Location of Pit Center**

Latitude 36.7061

Longitude -107.20963

(NAD 1927)

**Pit ID**

850851

**Pit Type**

Glycol Dehydrator

**Date Closure Started:** 6/2/05

**Date Closure Completed:** 6/2/05

**Closure Method:** Pushed In

**Bedrock Encountered ?** ☐

**Cubic Yards Excavated:**

**Vertical Extent of Equipment Reached ?** ☐

**Description Of Closure Action:**

The pit was assessed and sampled in accordance with NMOCD guidelines. Based on assessment findings, the pit was backfilled.

**Pit Closure Sampling:**

Sample ID	Sample Date	Head Space	BTEX Total (mg/kg)	Benzene (mg/kg)	TPH DRO (mg/kg)	Purpose	Location	Depth