District 1 r625 N. French Dr., Hobbs, NM 88240 District II 1301 W. Grand Avenue, Artesia, NM 88210 District III 1000 Rio Brazos Road, Aztec, NM 87410

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 office

Pit or Below-Grad	de Tank Registration or Clos	sure Corps
	nk covered by a "general plan"? Yes or below-grade tank Closure of a pit or	
Operator: BURLINGTON RESOURCES OIL & GAS COMPANY LP Telephone:	505-326-9700 e-mail address: pclugston(	@br-inc.com
Address: 3401 E. 30TH STREET, FARMINGTON, NM 87402	pologotom	Formation: Basin FC
Facility or well name: McKenzie B Com 100S API #:	30-045-32890 U/L or Otr/Otr D S	ec 9 T 30N R 12W
		e Owner Federal X State Private Indian
Pit	Below-grade tank	
Type: Drilling X Production Disposal	Volume:bbl Type of fluid:	
Workover Emergency	Construction material:	
Lined X Unlined	Double-walled, with leak detection? Yes If	If not, explain why not.
Liner type: Synthetic Thickness12mil Clay		
Pit Volume bbl		
Depth to ground water (vertical distance from bottom of pit to seasonal high	Less than 50 feet	(20 points)
water elevation of ground water.)	50 feet or more, but less than 100 feet	(10 points)
	100 feet or more	( 0 points) 10
Wellhead protection area: (Less than 200 feet from a private domestic	Yes	(20 points)
water source, or less than 1000 feet from all other water sources.)	No	( 0 points) 0
Distance to surface water: (horizontal distance to all wetlands, playas,	Less than 200 feet	(20 points)
irrigation canals, ditches, and perennial and ephemeral watercourses.)	200 feet or more, but less than 1000 feet	(10 points)
	1000 feet or more	( 0 points) 20
	Ranking Score (Total Points)	30
If this is a pit closure: (1) attach a diagram of the facility showing the pit's rela	tionship to other equipment and tanks. (2) Indica	te disposal location: (check the onsite box if
your are burying in place) onsite X offsite If offsite, name of facility	y (3) Attach a g	general description of remedial action taken including
remediation start date and end date. (4) Groundwater encountered: No X	es 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.	(6) The pit closure date was 4/4/2006	
Additional Comments:		
AFT The cut + hill dead	saw was submi	the with
the APB Showing	distance & desertion	n pit
to well head		8
y wa man.		
I hereby certify that the information above is true and complete to the best of m		
been/will be constructed or closed according to NMOCD guidelines , a  Date: 5/4/06	a general permit X, or ap (attached) altern	ative OCD-approved plan
Printed Name/Title Patsy Clugston / Sr. Regulatory Specialist	Signature Fatsy	(lught.
Your certification and NMOCD approval of this application/closure does not re		of the nit or tank contaminate ground water or
otherwise endanger public health or the environment. Nor does it relieve the opregulations.		
Approval:		_ //
CINY CL & GAS INSPECTICA, CUST. (3)		MAY 1 1 200
Printed Name/Title	Signature Syundon Z	Date:

