District I 3 1625 N. French Dr., Hobbs, NM 88240

District II

1301 W Grand Ave., Artesia, NM 88210

District III 1000 Rio Brazos Rd, Aztec, NM 87410

District IV

1220 S. St. Francis Dr., Santa Fe, NM 87505

Form C-144

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

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

 $\overline{\alpha}$

June 16, 2008 For temporary pits, closed-loop sytems, and below-grade

Form C-144

tanks, submit to the appropriate NMOCD District Office

For permanent pits and exceptions submit to the Santa Fe Environmental Bureau office and provide a copy to the appropriate NMOCD District Office.

| Pit, Closed-Loop System, Below-Grade Tank, or Prup Jill 17'08 | | | | | | |
|--|--|--|--|--|--|--|
| Proposed Alternative Method Permit or Closure Plan Application OIL CONS. DIV. | | | | | | |
| Type of action: X Permit of a pit, closed-loop system, below-grade tank, or proposed alternative method IST. 3 | | | | | | |
| Closure of a pit, closed-loop system, below-grade tank, or proposed alternative method | | | | | | |
| Instructions: Please submit one application (Form C-144) per individual Please be advised that approval of this request does not relieve the operator of hab | . , . , | | | | | |
| environment. Nor does approval relieve the operator of its responsibility to comply w | | | | | | |
| Operator: Burlington Resources Oil & Gas Company, LP | OGRID#: <u>14538</u> | | | | | |
| Address: PO Box 4289, Farmington, NM 87499 | | | | | | |
| Facility or well name: Huerfano Unit #237 | | | | | | |
| | CD Permit Number: | | | | | |
| U/L or Qtr/Qtr: C(NENW) Section: 17 Township: 26N | Range: 9W County: San Juan | | | | | |
| | Longitude: 107.814770' W NAD: X 1927 1983 | | | | | |
| Surface Owner: X Federal State Private Trib | al Trust or Indian Allotment | | | | | |
| Pit: Subsection F or G of 19.15.17.11 NMAC | X Closed-loop Systems: Subsection H of 19.15.17.11 NMAC | | | | | |
| Temporary: Drilling Workover | Drying Pad X Tanks Haul-off Bins Other: | | | | | |
| Permanent Emergency Cavitation | Lined Unlined | | | | | |
| Lined Unlined | Liner type: Thickness mil LLDPE HDPE PVC | | | | | |
| Liner type: ThicknessmilLLDPEHDPEPVC | Other: | | | | | |
| Other String-Reinforced | Seams: Welded Factory Other: | | | | | |
| Seams: Welded Factory Other | Volume: 500 bbl 104 yd3 | | | | | |
| Volume:bbl Dimensions: LxWxD | Dimernsions: Length 45' x Width 10' | | | | | |
| | | | | | | |
| Below-grade tank: Subsection I of 19.15 17.11 NMAC | Fencing: Subsection D of 19.15 17.11 NMAC | | | | | |
| Volume:bbl | Chain link, six feet in height, two strangs of barbed wire at top | | | | | |
| Type of fluid: | Four foot height, four strands of barbed wire evenly spaced between | | | | | |
| Tank Construction Material: | one and four feet | | | | | |
| Secondary containment with leak detection | Netting: Subsection E of 19.15.17.11 | | | | | |
| Visible sidewalls, liner, 6-inch lift and automatic overflow shut-off | Screen Netting Other | | | | | |
| Visible sidewalls and liner | Monthly inspections | | | | | |
| Visible sidewalls only | Signs: Subsection C of 19.15.17.11 NMAC | | | | | |
| Other: | 12"x 24", 2" lettering, provided Operator's name, site location, and | | | | | |
| Liner type: Thickness:mul HDPE PVC | emergency telephone numbers | | | | | |
| Other: | X Signed in compliance with 19.15.3.103 NMAC | | | | | |
| | | | | | | |
| Alternative Method: | Administrative Approvals and Exceptions: | | | | | |
| Submittal of an exception request is required. Exceptions must be submitted to the Santa Fe Environmental Bureau office for consideration | Justifications and/or demonstrations of equivalency are required. Please refer to 19.15.17 NMAC for guidance. | | | | | |
| of approval. | 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 Fe Environmental Bureau | | | | | |
| | office for consideration of approval. (Fencing in Design Plan) | | | | | |
| | Exception(s): Requests must be submitted to the Santa Fe | | | | | |

| Siting Criteria (regarding permitting): 19.15.17.10 NMAC Instructions: The applicant must demonstrate compliance for each siting criteria below in the application. 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. Applicant must attach justification for request. Please refer to 19.15.17.10 NMAC for guidance. Siting criteria does not apply to drying pads or above grade-tanks associated with a closed-loop system. | | | | | |
|---|-------------|-------------|--|--|--|
| Ground water is less than 50 feet below the bottom of the temporary pit, permanent pit, or below-grade tank. - NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells | Yes | □No | | | |
| Within 300 feet of a continuously flowing watercourse, or 200 feet of any other watercourse, lakebed, sinkhole, or playa Jake (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. | Yes | □No | | | |
| (Applies to temporary, emergency, or cavitation pits and below-grade tanks) - Visual inspection (certification) of the proposed site; Aerial photo; Satellite image | □NA | | | | |
| Within 1000 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application. | Yes | No | | | |
| (Applied to permanent pits) - Visual inspection (certification) of the proposed site; Aerial photo; Satellite image | □NA | | | | |
| Within 500 horizonal 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. | □Yes | □No | | | |
| - NM Office of the State Engineer - IWATERS database search; Visual inspection (certification) of the proposed site. | | | | | |
| 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 | Yes | □No | | | |
| - Written confirmation or verification from the municipality; Written approval obtained from the municipality Within 500 feet of a wetland. | Yes | □No | | | |
| - US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site Within the area overlying a subsurface mine. | □Yes | | | | |
| - Written confirmation or verification or map from the NM EMNRD - Mining and Mineral Division | | | | | |
| Within an unstable area. Engineering measures incorporated into the design; NM Bureau of Geology & Mineral Resources; USGS; NM Geological Society; Topographic map | ∐Yes | ∐No | | | |
| Within a 100-year floodplain - FEMA map | Yes | □No | | | |
| Temporary Pits, Emergency Pits, and Below-grade Tanks Permit Application Attachment 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 de | ocuments ar | e attached. | | | |
| Hydrogeologic Report (Below-grade Tanks) - based upon the requirements of Paragraph (4) of Subsection B of 19.15.17.9 NMAC Hydrogeologic Data (Temporary and Emergency Pits) - based upon the requirements of Paragraph (2) of Subsection B of 19.15.17.9 NMAC Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC Design Plan - based upon the appropriate requirements of 19.15.17.11 NMAC Operating and Maintence Plan - based upon the appropriate requirements of 19.15.17.12 NMAC Closure Plan - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC | | | | | |
| Previously Approved Design (attach copy of API Number: or Permit | | | | | |
| Closed-loop Systems Permit Application Attachment 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 documents are attached. Geologic and Hydrogeologic Data (required for on-site closure) - based upon the requirements of Paragraph (3) of Subsection B of 19.15.17.9 Siting Criteria Compliance Demonstrations (required for on-site closure) - based upon the appropriate requirements of 19.15.17.10 NMAC Subsection B of 19.15.17.11 NMAC | | | | | |
| X Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC X Closure Plan - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC | | | | | |
| Previously Approved Design (attach copy of API Number: | | | | | |

| 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 documents are attached. | | | | |
| Hydrogeologic Report - based upon the requirements of Paragraph (I) 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 | | | | |
| Liner Specifications and Compatibility Assessment - 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 19.15.17.12 NMAC | | | | |
| Freeboard and Overtopping Prevention Plan - based upon the appropriate requirements of 19.15.17.11 NMAC | | | | |
| ☐ Nuisance or Hazardous Odors, including H2S, Prevention Plan ☐ Emergency Response Plan | | | | |
| Oil Field Waste Stream Characterization | | | | |
| Monitoring and Inspection Plan | | | | |
| Erosion Control Plan | | | | |
| Closure Plan - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC | | | | |
| Closure Figure - based upon the appropriate requirements of Subsection C of 17.13.17.19 (MAC and 19.13.17.19 MMAC | | | | |
| Proposed Closure: 19.15.17.13 NMAC | | | | |
| Type: Drilling Workover Emergency Cavitation Permanent Pit Below-grade Tank X Closed-loop System Altern | ative | | | |
| | | | | |
| Proposed Closure X Waste Excavation and Removal | | | | |
| On-site Closure Method (only for temporary pits and closed-loop | | | | |
| In-place On-site Trench | | | | |
| Alternative Closure Method (Exceptions must be submitted to the Santa Fe Environmental Bureau for | or | | | |
| 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. Recommentations 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. Justification 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. | ∏Yes∏No | | | |
| - NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells | □NA □NA | | | |
| Ground water is between 50 and 100 feet below the bottom of the buried waste | ☐Yes ☐No | | | |
| - NM Office of the State Engineer - iWATERS database serach; USGS; Data obtained from nearby wells | □NA □ | | | |
| Ground water is more than 100 feet below the bottom of the buried waste. | Yes No | | | |
| - NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells | □NA | | | |
| Within 300 feet of a continuously flowing watercourse, or 200 feet of any other watercourse, lakebed, sinkhole, or playa lal | ☐Yes ☐No | | | |
| (measured from the ordinary high-water mark). | | | | |
| - Topographic map; Visual inspection (certification) of the proposed site | | | | |
| Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial - 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 | ∐Yes ∐No | | | |
| of initial application. | | | | |
| - NM Office of the State Engineer - iWATERS database; Visual inspection (certification) of the proposed site | | | | |
| Within incorporated municipal boundaries or within a defined municipal fresh water well field covered under a municipal | ∏Yes∏No | | | |
| 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 | | | | |
| Within 500 feet of a wetland. | ☐Yes ☐No | | | |
| proposed site | | | | |
| Within the area overlying a subsurface mine. | ∏Yes∏No | | | |
| - Written confirmation or verification or map from the NM EMNRD - Mining and Mineral Division | | | | |
| Within an unstable area. | | | | |
| - Engineering measures incorporated into the design; NM Bureau of Geology & Mineral Resources; USGS; NM | | | | |
| Geological Society; Topographic map | | | | |
| Within a 100-year floodplain | | | | |
| - FEMA map | ∐Yes ∐No | | | |

| Waste Excavation and Removal Closure Plan Checklist: (19.15.17.13 N | | | | | | |
|---|--|--|--|--|--|--|
| to the closure plan. Please inducfate, by a check mark in the box, that the documents are attached. X Protocols and Procedures - based upon the appropriate requirements of 19.15 17 13 NMAC | | | | | | |
| Yrotocols and Procedures - based upon the appropriate requirements of 19.15 17 13 NMAC Confirantion Sampling Plan (if applicable) - based upon the appropriate requirements of Subsection F of 19.15.17.13 NMAC | | | | | | |
| | | | | | | |
| I ==== | Soil Backfill and Cover Design Specifications - based upon the appropriate requirements of Subsection H of 19.15 17 13 NMAC | | | | | |
| X Re-vegetation Plan - based upon the appropriate requirements of Subs | section I of 19.15,17.13 NMAC | | | | | |
| X Site Reclamation Plan - based upon the appropriate requirements of S | ubsection G of 19 15.17.13 NMAC | | | | | |
| Waste Removal Closure for Closed-loop Systems That Utilize Haul-off facilities for the disposal of liquids, drilling fluids and drill cuttings. | Bins Only: (19 15 17.13 D NMAC) Instructions: Please identify the facility or | | | | | |
| Disposal Facility Name: Envirotech, Basin Disposal | Disposal Facility Permit Number: NM-01-0011 & NM-01-005 | | | | | |
| On-Site Closure Plan Checklist: (19 15 17 13 NMAC) Instructions: Each of the check mark in the box, that the documents are attached. | following ttems must bee attached to the closure plan. Please indicate, by a | | | | | |
| Siting Criteria Compliance Demonstrations - based upon the appropri | ate requirements of 19.15.17.10 NMAC | | | | | |
| Proof of Surface Owner Notice - based upon the appropriate requiren | • | | | | | |
| Construction and Design of Burial Trench (if applicable) based upon | the appropriate requirements of 19 15.17.11 NMAC | | | | | |
| Protocols and Procedures - based upon the appropriate requirements of | •••• | | | | | |
| Confirmation Sampling Plan (if applicable) - based upon the appropri | ate requirements of Subsection F of 19.15.17.13 NMAC | | | | | |
| Waste Material Sampling Plan - based upon the appropriate requirem | | | | | | |
| Disposal Facility Name and Permit Number (for liquids, drilling fluid | s and drill cuttings or in case on-site closure standards cannot be | | | | | |
| Soil Cover Design - based upon the appropriate requirements of Subs | - | | | | | |
| Re-vegetation Plan - based upon the appropriate requirements of Sub- | | | | | | |
| Site Reclamation Plan - based upon the appropriate requirements of S | ubsection G of 19 15 17.13 NMAC | | | | | |
| Operator Application Certification: | | | | | | |
| I hereby certify that the information submitted with this application is true, accura | te and complete to the best of my knowledge and belief. | | | | | |
| Name (Print): Crystal Tafoya | Title Regulatory Technician | | | | | |
| Signature Constal Tologo | | | | | | |
| | Date: 7/16/2008 | | | | | |
| e-mail address. <u>crystal tafoya@conocophil/fips.co/h</u> | Telephone: 505-326-9837 | | | | | |
| OCD Approval: Permit Application (including closure plan) Closure Plan (only) OCD Representative Signature: Approval Date: 7-18-08 | | | | | | |
| | <u> </u> | | | | | |
| | | | | | | |
| OCD Representative Signature: | Approval Date: 7-18-08 OCD Permit Number | | | | | |
| OCD Representative Signature: Sol Soll Title: Enjiro/spec | Approval Date: 7-18-08 OCD Permit Number | | | | | |
| OCD Representative Signature: Sol Soll Title: Enjiro/spec | Approval Date: 7-18-08 OCD Permit Number: 17.13 NMAC | | | | | |
| OCD Representative Signature: Title: | Approval Date: 7-18-08 OCD Permit Number: 17.13 NMAC | | | | | |
| OCD Representative Signature: Title: | Approval Date: 7-18-08 OCD Permit Number 17.13 NMAC Closure Completion Date: | | | | | |
| OCD Representative Signature: Title: Fig. Spec Closure Report (required within 60 days of closure completion): Subsection K of 19 15 Closure Method: Waste Excavation and Removal On-Site Closure | Approval Date: 7-18-08 OCD Permit Number 17.13 NMAC Closure Completion Date: ternative Closure | | | | | |
| OCD Representative Signature: Title: English Spec Closure Report (required within 60 days of closure completion): Subsection K of 19 15 Closure Method: Waste Excavation and Removal On-Site Closure All of different from approved plan, please explain Closure Report Attactment Checklist: Instructions: Each of the following item box, that the documents are attached. | Approval Date: 7-18-08 OCD Permit Number 17.13 NMAC Closure Completion Date: ternative Closure | | | | | |
| OCD Representative Signature: Title: | Approval Date: 7-18-08 OCD Permit Number 17.13 NMAC Closure Completion Date: ternative Closure | | | | | |
| OCD Representative Signature: Title: English Spec Closure Report (required within 60 days of closure completion): Subsection K of 19 15 Closure Method: Waste Excavation and Removal On-Site Closure All of different from approved plan, please explain Closure Report Attactment Checklist: Instructions: Each of the following item box, that the documents are attached. | Approval Date: 7-18-08 OCD Permit Number 17.13 NMAC Closure Completion Date: ternative Closure | | | | | |
| OCD Representative Signature: Title: | Approval Date: 7-18-08 OCD Permit Number 17.13 NMAC Closure Completion Date: ternative Closure | | | | | |
| OCD Representative Signature: Title: | Approval Date: 7-18-08 OCD Permit Number 17.13 NMAC Closure Completion Date: ternative Closure | | | | | |
| Closure Report (required within 60 days of closure completion): Subsection K of 19 15 Closure Method: Waste Excavation and Removal On-Site Closure All If different from approved plan, please explain Closure Report Attactment Checklist: Instructions: Each of the following item 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 Disposal Facility Name and Permit Number | Approval Date: 7-18-08 OCD Permit Number 17.13 NMAC Closure Completion Date: ternative Closure | | | | | |
| OCD Representative Signature: Title: Evilospec Closure Report (required within 60 days of closure completion): Subsection K of 19 15 Closure Method: Waste Excavation and Removal On-Site Closure All of different from approved plan, please explain Closure Report Attactment Checklist: Instructions: Each of the following item 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 Disposal Facility Name and Permit Number Soil Backfilling and Cover Installation | Approval Date: 7-18-08 OCD Permit Number 17.13 NMAC Closure Completion Date: ternative Closure | | | | | |
| OCD Representative Signature: Title: Spec | Approval Date: 7-18-08 OCD Permit Number 17.13 NMAC Closure Completion Date: ternative Closure | | | | | |
| OCD Representative Signature: Title: Endicologue Closure Report (required within 60 days of closure completion): Subsection K of 19 15 Closure Method: Waste Excavation and Removal On-Site Closure All of different from approved plan, please explain Closure Report Attactment Checklist: Instructions: Each of the following item 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 Disposal Facility Name and Permit Number Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique Site Reclamation (Photo Documentation) | Approval Date: 7-18-08 OCD Permit Number: .17.13 NMAC Closure Completion Date: ternative Closure s must be attached to the closure report. Please indicate, by a check mark in the | | | | | |
| OCD Representative Signature: Title: Evilospec Closure Report (required within 60 days of closure completion): Subsection K of 19 15 Closure Method: Waste Excavation and Removal On-Site Closure All of different from approved plan, please explain Closure Report Attactment Checklist: Instructions: Each of the following item 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 Disposal Facility Name and Permit Number Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique Site Reclamation (Photo Documentation) On-site Closure Latitude: | Approval Date: 7-18-08 OCD Permit Number 17.13 NMAC Closure Completion Date: ternative Closure | | | | | |
| OCD Representative Signature: Title: Ending Spec Closure Report (required within 60 days of closure completion): Subsection K of 19 15 Closure Method: Waste Excavation and Removal On-Site Closure All of different from approved plan, please explain Closure Report Attactment Checklist: Instructions: Each of the following item 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 Disposal Facility Name and Permit Number Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique Site Reclamation (Photo Documentation) On-site Closure Latitude: Operator Closure Certification: | Approval Date: 7-18-08 OCD Permit Number: .17.13 NMAC Closure Completion Date: ternative Closure sis must be attached to the closure report. Please indicate, by a check mark in the Longitude: | | | | | |
| Closure Report (required within 60 days of closure completion): Subsection K of 19 15 Closure Method: Waste Excavation and Removal On-Site Closure All of different from approved plan, please explain Closure Report Attactment Checklist: Instructions: Each of the following item 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 Disposal Facility Name and Permit Number Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique Site Reclamation (Photo Documentation) On-site Closure Latitude: Operator Closure Certification: I hereby certify that the information and attachments submitted with this closure report is to closure complies with all applicable closure requirements and conditions specified in the agents. | Approval Date: 7-18-08 OCD Permit Number: .17.13 NMAC Closure Completion Date: ternative Closure s must be attached to the closure report. Please indicate, by a check mark in the Longitude: NAD: 1927 1983 ue, accurate and complete to the best of my knowledge and belief. I also certify that the | | | | | |
| Closure Report (required within 60 days of closure completion): Subsection K of 19 15 Closure Method: Waste Excavation and Removal On-Site Closure All If different from approved plan, please explain Closure Report Attactment Checklist: Instructions: Each of the following item 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 Disposal Facility Name and Permit Number Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique Site Reclamation (Photo Documentation) On-site Closure Latitude: Operator Closure Certification: I hereby certify that the information and attachments submitted with this closure report is to | Approval Date: 7-18-08 OCD Permit Number: .17.13 NMAC Closure Completion Date: ternative Closure s must be attached to the closure report. Please indicate, by a check mark in the Longitude: NAD: 1927 1983 ue, accurate and complete to the best of my knowledge and belief. I also certify that the | | | | | |
| Closure Report (required within 60 days of closure completion): Subsection K of 19 15 Closure Method: Waste Excavation and Removal On-Site Closure All of different from approved plan, please explain Closure Report Attactment Checklist: Instructions: Each of the following item 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 Disposal Facility Name and Permit Number Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique Site Reclamation (Photo Documentation) On-site Closure Latitude: Operator Closure Certification: I hereby certify that the information and attachments submitted with this closure report is to closure complies with all applicable closure requirements and conditions specified in the agents. | Approval Date: 7-18-08 OCD Permit Number: | | | | | |

Form C-144 Oil Conservation Division Page 4 of 4

NEW XICO OIL CONSERVATION COMMISSION WELL LOCATION AND ACREAGE DEDICATION PLAT

Supersedes C-128 Effective 1-1-65

All distances must be from the outer boundaries of the Section

| | EL | PASO | NATURAL | CAS COMPANY | HUERFANO UNIT | (SF - 077980 | -A) 237 | | |
|-------|--|-----------------|----------------|------------------------|--------------------------|-----------------------|---|--|--|
| · · · | С | | 17 | 26-N | 9 - W | SAN JUAN | | | |
| • | 1090 | 1 4 | | NORTH | . 1550 fc- i | t transfer | | | |
| , | 6476 | | GA.1 | LUP | ANCEL PEAK | GALLUP | 320.00 | | |
| 1 | Outline t | he acre | age dedica | ted to the subject v | well by colored pencil o | r hachure marks on | FFFIVED | | |
| 2 | 2 If more than one lease is dedicated to the well, outline each and identify the ownerskip thereof (both as to working | | | | | | | | |
| :3 | interest and royalty) FEB 5 1973 3 If more than one lease of different ownership is dedicated to the well, have the interests of all ownership in dedicated to the well. | | | | | | | | |
| • | | | | mitization, force-poo | | | DIST. 3 | | |
| | - Xyes | [] \ | vo If a | nswer is "vest" type | of consolidation | U | nitization | | |
| | If answer | | | owners and tract des | scriptions which have ac | tually been consolida | ated. (Use reverse side of | | |
| | No allowa | ıble wil | l be assign | | | | munitization, unitization, approved by the Commis- | | |
| ~ | S 10B. | NOTE | : THIS I | | SHOW PROPER POOL | | | | |
| 1 | | | | Ŋ | 1 | | CERTIFICATION | | |
| 3 | | 1 | 90, | N | 1 | 1 1 | certify that the information con- rein is true and complete to the | | |
| | | 1 1 | 0/ | | 1 | l i | y knowledge and belief | | |
| 一 | /550 | • · · · · · · · | - 6 | . } | ; | Ori | ginal Signed F. H. WOOD | | |
| 3 | | | | | - | P | etroleum Engineer | | |
| | | ! | , | | 1 | North, May | Il Paso Natural Gas Co. | | |
| | | : | | Ŋ | 1 | J. 18 | anuary 31, 1973 | | |
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| | | ! | | | | shown on notes of | certify that the well location this plat was platted from field actual surveys made by me or supervision, and that the same | | |
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Burlington Resources Oil & Gas Company, LP Closed-loop Plans

Closed-loop Design Plan

BR's closed loop system will not entail a drying pad, temporary pit, below grade tank or sump. It will include an above ground tank suitable for holding the cuttings and fluids for rig operations. The tank will be sufficient volume to maintain a safe free board between disposal of the liquids and solids from rig operations.

- 1. Fencing is not required for an above ground closed-loop system
- 2. It will be signed in compliance with 19.15.3.103 NMAC
- 3. A frac tank will be on location to store fresh water

Closed-loop Operating and Maintenance Plan

BR's closed-loop tank will be operated and maintained to contain liquids and solids in order to prevent contamination of fresh water sources, in order to protect public health and the environment. To ensure the operation is maintained the following steps will be followed:

- 1. The liquids will be vacuumed out and disposed of at the Basin Disposal facility (Permit # NM-01-005). Solids in the closed-loop tank will be vacuumed out and disposed of at Envirotech (Permit # NM-01-0011) on a periodic basis to prevent over topping.
- 2. No hazardous waste, miscellaneous solid waste or debris will be discharged into or stored in the tank. Only fluids or cutting used or generated by rig operations will be placed or stored in the tank.
- 3. The division district office will be notified within 48 hours of the discovery of compromised integrity of the closed-loop tank. Upon the discovery of the compromised tank, repairs will be enacted immediately
- 4. All of the above operations will be inspected and a log will be signed and dated. During rig operations the inspection will be daily.

Closed-loop Closure Plan

The closed-loop tank will be closed in accordance with 19.15.17.13. This will be done by transporting cuttings and all remaining sludges to Envirotech (Permit # NM-01-0011) immediately following rig operations. All remaining liquids will be transported and disposed of in the Basin Disposal facility (Permit # NM-01-005). The tanks will be removed from the location as part of the rig move. At time of well abandonment, the site will be reclaimed and re-vegetated to pre-existing conditions when possible.