

District I  
P.O. Box 1980, Hobbs, NM  
District II  
P.O. Drawer, Artesia, NM 88211  
District III  
1000 Rio Brazos Rd. Aztec, NM 87410

State Of New Mexico  
Energy, Minerals and Natural Resources Department  
OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

RECEIVED  
JUL - 9 1999  
OIL CON. DIV.  
DIST. 3

SUBMIT 1 COPY TO  
APPROPRIATE  
DISTRICT OFFICE  
AND 1 COPY TO  
SANTA FE OFFICE  
(Revised 3/9/94)

## PIT REMEDIATION AND CLOSURE REPORT

|                                                                                                                                                    |                                                   |                               |                           |                           |                                                                                             |
|----------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|-------------------------------|---------------------------|---------------------------|---------------------------------------------------------------------------------------------|
| Operator:                                                                                                                                          | <u>Conoco Inc.</u>                                |                               | Telephone:                | <u>505-324-5813</u>       |                                                                                             |
| Address:                                                                                                                                           | <u>3315 Bloomfield Hwy - Farmington, NM 87401</u> |                               |                           |                           |                                                                                             |
| Facility Or:                                                                                                                                       | <u>Fogelson 10-1</u>                              |                               |                           |                           |                                                                                             |
| Well Name                                                                                                                                          |                                                   |                               |                           |                           |                                                                                             |
| Location:                                                                                                                                          | Unit or Qtr/Qtr Sec                               | <u>    </u> E <u>    </u> Sec | <u>10</u> T               | <u>29</u> N R             | <u>11</u> County San Juan                                                                   |
| Pit Type:                                                                                                                                          | Separator                                         | <u>    </u> X <u>    </u>     | Dehydrator                | <u>    </u>               | Other <u>    </u>                                                                           |
| Land Type:                                                                                                                                         | BLM                                               | <u>    </u> State <u>    </u> | Fee                       | <u>    </u> X <u>    </u> | Other <u>    </u>                                                                           |
| Pit Location:<br>(Attach diagram)                                                                                                                  | Pit dimension:                                    | length                        | <u>15'</u>                | width                     | <u>16'</u> depth <u>4'</u>                                                                  |
|                                                                                                                                                    | Reference:                                        | wellhead                      | <u>    </u> X <u>    </u> | other                     | <u>    </u>                                                                                 |
|                                                                                                                                                    | Footage from reference:                           | <u>100'</u>                   |                           |                           |                                                                                             |
|                                                                                                                                                    | Direction from reference:                         | <u>309</u>                    | Degrees                   | <u>    </u>               | East of <u>    </u> X <u>    </u> North<br><u>    </u> X <u>    </u> West <u>    </u> South |
| Depth To Ground Water:<br>(Vertical distance from<br>contaminants to seasonal<br>high water elevation of<br>ground water)                          | Less than 50 feet                                 | (20 points)                   |                           |                           |                                                                                             |
|                                                                                                                                                    | 50 feet to 9 feet                                 | (10 points)                   |                           |                           |                                                                                             |
|                                                                                                                                                    | Greater than 100 feet                             | ( 0 points)                   |                           |                           |                                                                                             |
|                                                                                                                                                    | Total                                             | <u>0</u>                      |                           |                           |                                                                                             |
| Wellhead Protection Area:<br>(Less than 200 feet from a private<br>domestic water source, or; less than<br>1000 feet from all other water sources) | Yes                                               | (20 points)                   |                           |                           |                                                                                             |
|                                                                                                                                                    | No                                                | ( 0 points)                   |                           |                           |                                                                                             |
|                                                                                                                                                    | Total                                             | <u>0</u>                      |                           |                           |                                                                                             |
| Distance To Surface Water:<br>(Horizontal distance to perennial<br>lakes, ponds, rivers, streams, creeks,<br>irrigation canals and ditches)        | Less than 200 feet                                | (20 points)                   | (20 points)               |                           |                                                                                             |
|                                                                                                                                                    | 200 feet to 1000 feet                             | (10 points)                   | (10 points)               |                           |                                                                                             |
|                                                                                                                                                    | Greater than 1000 feet                            | ( 0 points)                   | ( 0 points)               |                           |                                                                                             |
|                                                                                                                                                    | Total                                             | <u>0</u>                      |                           |                           |                                                                                             |
|                                                                                                                                                    | RANKING SCORE (TOTAL POINTS):                     | <u>0</u>                      |                           |                           |                                                                                             |

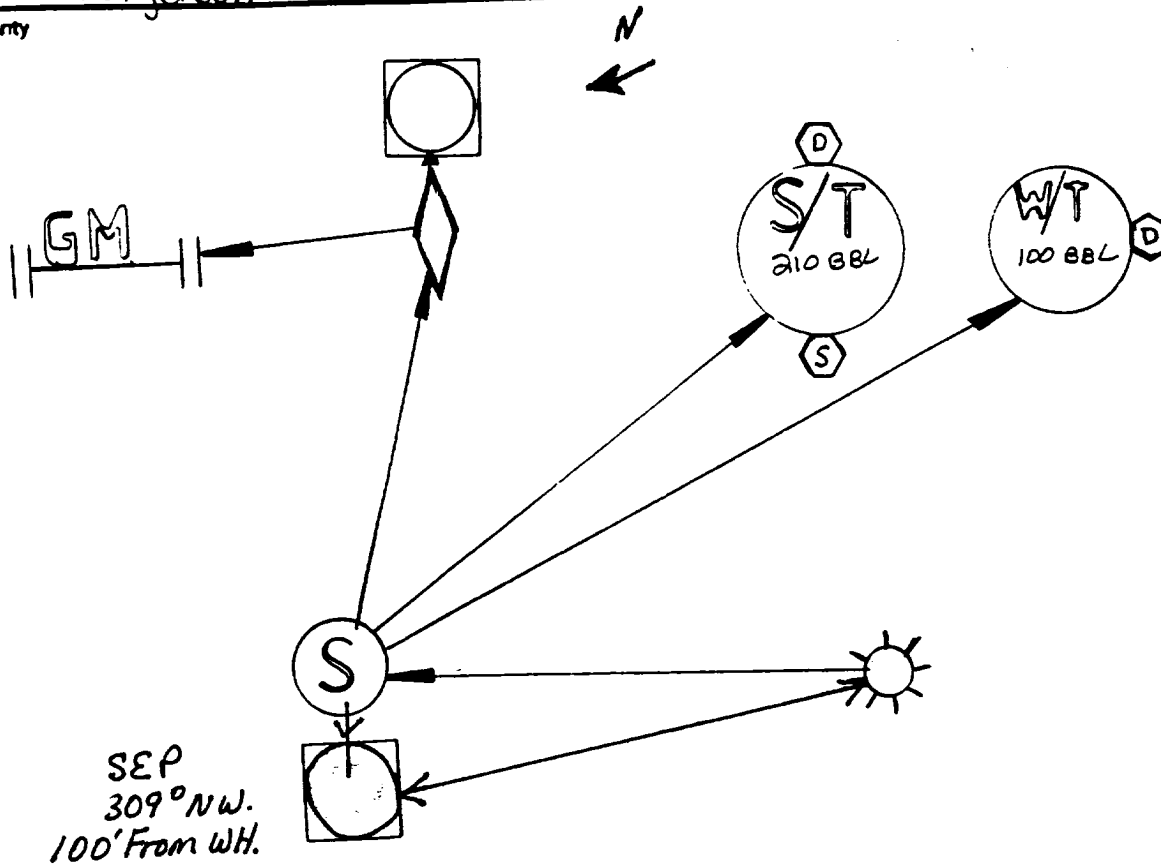
|                                                                                                                                                                                                                                                                       |                       |                                   |                                         |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|-----------------------------------|-----------------------------------------|
| Date Remediation Started: _____                                                                                                                                                                                                                                       |                       | Date Completed: _____             |                                         |
| Remediation Method:                                                                                                                                                                                                                                                   | Excavation: _____     | Approx. cubic yards _____         |                                         |
| (Check all appropriate sections)                                                                                                                                                                                                                                      |                       |                                   |                                         |
|                                                                                                                                                                                                                                                                       | Landfarm _____        | Insitu Bioremediation _____       |                                         |
|                                                                                                                                                                                                                                                                       | Other _____           |                                   |                                         |
|                                                                                                                                                                                                                                                                       |                       |                                   |                                         |
| Remediation Location:                                                                                                                                                                                                                                                 | Onsite _____          | Offsite _____                     |                                         |
| (ie. landfarmed onsite, name and location of offsite facility)                                                                                                                                                                                                        |                       |                                   |                                         |
| General Description Of Remedial Action: <u>One sample was taken at 3' below bottom of pit center. No PID reading was conducted on location. Sample was transported to laboratory for TPH analysis per EPA Method 8015 and for BTEX analysis per EPA Method 8020A.</u> |                       |                                   |                                         |
|                                                                                                                                                                                                                                                                       |                       |                                   |                                         |
|                                                                                                                                                                                                                                                                       |                       |                                   |                                         |
|                                                                                                                                                                                                                                                                       |                       |                                   |                                         |
|                                                                                                                                                                                                                                                                       |                       |                                   |                                         |
| Ground Water Encountered:                                                                                                                                                                                                                                             | No _____              | X _____                           | Yes _____                               |
|                                                                                                                                                                                                                                                                       |                       | Depth _____                       |                                         |
| Final Pit:                                                                                                                                                                                                                                                            | Sample location _____ | Center of pit below bottom of pit |                                         |
| Closure Sampling:                                                                                                                                                                                                                                                     | _____                 |                                   |                                         |
| (if multiple samples attach sample results and diagram of sample locations and depths)                                                                                                                                                                                | Sample depth _____    | 3'                                |                                         |
|                                                                                                                                                                                                                                                                       | Sample date _____     | 2/17/99                           | Sample time _____ 8:42 AM               |
| Sample Results                                                                                                                                                                                                                                                        |                       |                                   |                                         |
|                                                                                                                                                                                                                                                                       | Benzene (ppm)         | 0.84                              |                                         |
|                                                                                                                                                                                                                                                                       | Total BTEX (ppm)      | 43.84                             |                                         |
|                                                                                                                                                                                                                                                                       | Field headspace (ppm) | 480                               |                                         |
|                                                                                                                                                                                                                                                                       | TPH                   | 430                               |                                         |
| Ground Water Sample:                                                                                                                                                                                                                                                  | Yes _____             | No _____                          | X _____ (If yes, attach sample results) |
| I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF                                                                                                                                                               |                       |                                   |                                         |
| DATE                                                                                                                                                                                                                                                                  | 6-28-99               |                                   | PRINTED NAME _____                      |
| SIGNATURE                                                                                                                                                                                                                                                             | [Signature]           |                                   | AND TITLE P.L.                          |

Lease Name: Folgelson 10-1

Operator: R. Brooks

Date: 2-17-99

Site Security



Lease Name: Folgelson 10-1

Federal/ Indian Lease No: FEE

CA No.: 8910072810

Unit: E

Legal Description: SECT. 10 T129N R 11W

County: SAN JUAN

Load line valves :  
Sealed during Production

Drain line valves :  
Sealed during Production

Production Line valve:  
Sealed during sales

This lease is subject to the site security plan for  
San Juan Basin Operations. The plan is located at:  
Conoco Inc.  
3315 Bloomfield Hwy  
Farmington, NM

Fogelson 101

Sep Pit.

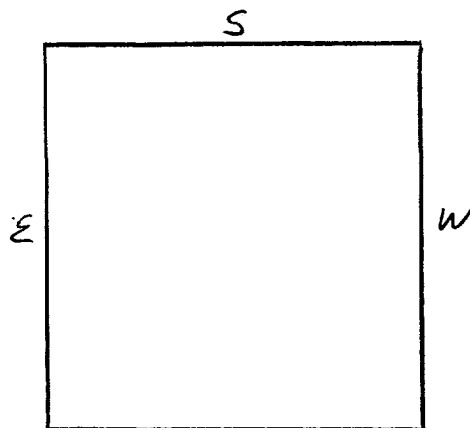
100' From well head

309° N.W.

15' x 16' x 4'

+

Installed 20 Bbl. P. + TNK.



CENTER OF PIT  
North Wall  
East Wall  
West Wall  
South Wall

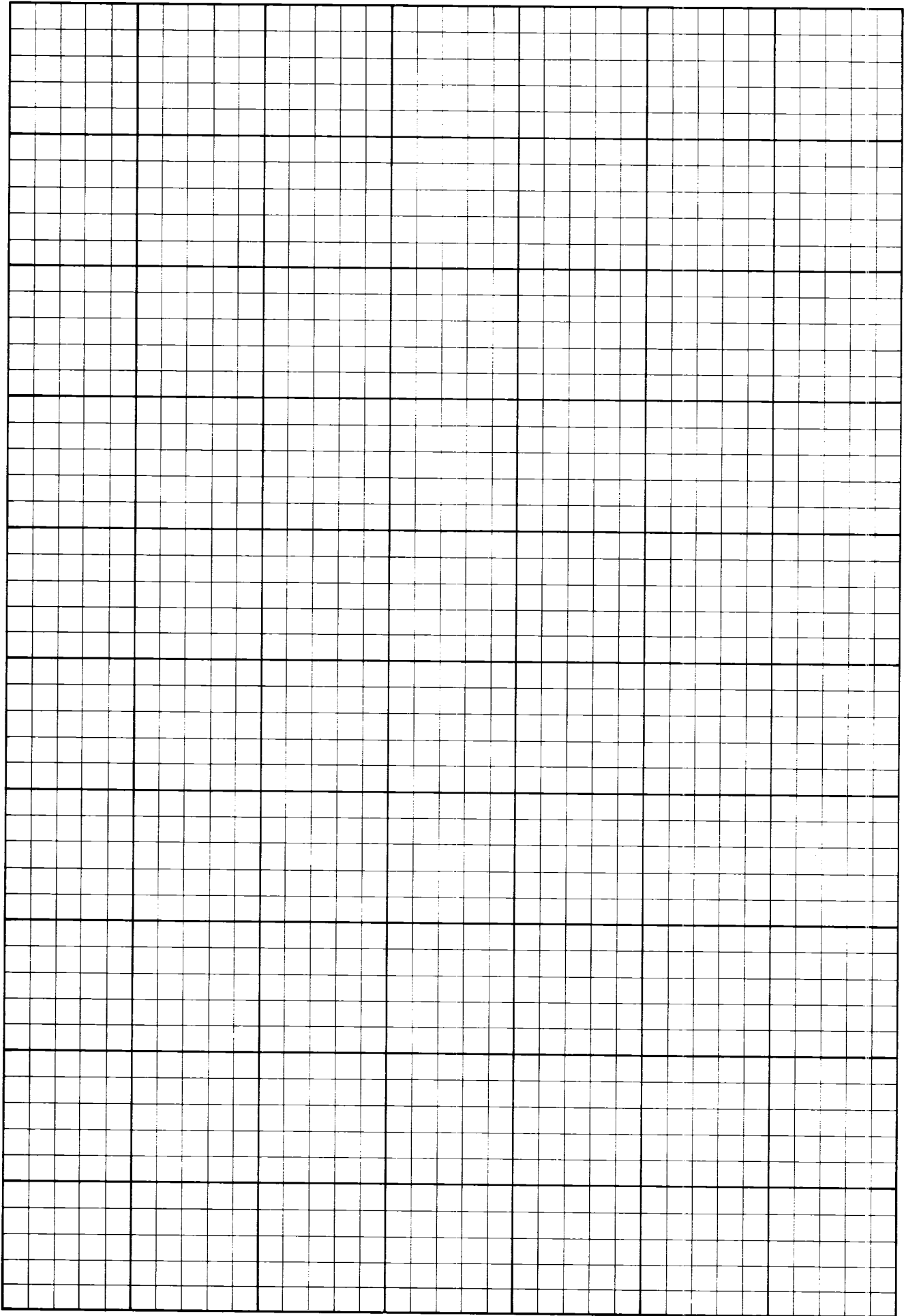
Time:

842  
~~843~~  
845  
847  
848

PPM:

480  
703  
85  
584  
32

N  
↓



# CHAIN OF CUSTODY RECORD

5015

Date: 2-17-99

Page 1 of 1

657 W. Maple • P. O. Box 2606 • Farmington NM 87499  
LAB: (505) 325-5667 • FAX: (505) 325-6256

| Purchase Order No.:                       |  |                  |             |        |       | Job No.            |  | Name             |  | Title                 |  |
|-------------------------------------------|--|------------------|-------------|--------|-------|--------------------|--|------------------|--|-----------------------|--|
| SEND INVOICE TO                           |  | Name             | Company     |        | Dept. |                    |  | Mailing Address  |  |                       |  |
|                                           |  | Address          |             |        |       |                    |  | City, State, Zip |  |                       |  |
|                                           |  | City, State, Zip |             |        |       |                    |  | Telephone No.    |  | Telefax No.           |  |
| Sampling Location:                        |  |                  |             |        |       | ANALYSIS REQUESTED |  |                  |  |                       |  |
| SE P                                      |  |                  |             |        |       |                    |  |                  |  |                       |  |
| Fogelson 10-1                             |  |                  |             |        |       |                    |  |                  |  |                       |  |
| Sampler:                                  |  |                  |             |        |       |                    |  |                  |  |                       |  |
| J. Valdez                                 |  |                  |             |        |       |                    |  |                  |  |                       |  |
| SAMPLE IDENTIFICATION                     |  |                  |             |        |       | LAB ID             |  |                  |  |                       |  |
|                                           |  | SAMPLE DATE      | SAMPLE TIME | MATRIX | PRES. |                    |  |                  |  |                       |  |
| Center of Pt.                             |  | 2-17-99          | 0842        | Soil   | NONE  |                    |  |                  |  |                       |  |
| North wall                                |  | 2-17-99          | 0844        | Soil   | NONE  |                    |  |                  |  |                       |  |
| East wall                                 |  | 2-17-99          | 0845        | Soil   | NONE  |                    |  |                  |  |                       |  |
| West wall                                 |  | 2-17-99          | 0847        | Soil   | NONE  |                    |  |                  |  |                       |  |
| South wall                                |  | 2-17-99          | 0848        | Soil   | NONE  |                    |  |                  |  |                       |  |
| 4 PT COMPOSITE                            |  | 2-17-99          | 0858        | Soil   | NONE  |                    |  |                  |  |                       |  |
| Relinquished by:                          |  |                  |             |        |       | Date/Time          |  | Received by:     |  | Date/Time             |  |
| Relinquished by:                          |  |                  |             |        |       | Date/Time          |  | Received by:     |  | Date/Time             |  |
| Relinquished by:                          |  |                  |             |        |       | Date/Time          |  | Received by:     |  | Date/Time             |  |
| Method of Shipment:                       |  |                  |             |        |       |                    |  | Rush             |  | Special Instructions: |  |
| Authorized by:                            |  |                  |             |        |       |                    |  | 24-48 Hours      |  | 10 Working Days       |  |
| (Client Signature Must Accompany Request) |  |                  |             |        |       |                    |  |                  |  |                       |  |

| Distribution: White – On Site | Yellow – LAB | Pink – Sampler | Goldenrod – Client |
|-------------------------------|--------------|----------------|--------------------|
|-------------------------------|--------------|----------------|--------------------|

[illegible]

OFF: (505) 325-5667



LAB: (505) 325-1556

March 10, 1999

Shirley Ebert  
Conoco, Inc.  
3315 Bloomfield Hwy  
Farmington, NM 87401  
TEL: (505) 324-5813  
FAX (505) 324-5825

RE: Fogelson 10-1 SEP

Order No.: 9902072

Dear Shirley Ebert,

On Site Technologies, LTD. received 2 samples on 2/17/99 for the analyses presented in the following report.

The Samples were analyzed for the following tests:

BTEX (SW8021B)  
Diesel Range Organics (SW8015)  
Gasoline Range Organics (SW8015)

There were no problems with the analyses and all data for associated QC met EPA or laboratory specifications except where noted in the Case Narrative.

If you have any questions regarding these tests results, please feel free to call.

Sincerely,

A handwritten signature in black ink, appearing to read 'David Cox'.

David Cox

OFF: (505) 325-5667



LAB: (505) 325-1556

**On Site Technologies, LTD.**

**Date:** 10-Mar-99

---

**CLIENT:** Conoco, Inc.  
**Project:** Fogelson 10-1 SEP  
**Lab Order:** 9902072

**CASE NARRATIVE**

---

Samples were analyzed using the methods outlined in the following references:

Test Methods for Evaluating Solid Waste, Physical/Chemical Methods, SW846, 3rd Edition

All method blanks, laboratory spikes, and/or matrix spikes met quality assurance objectives.

OFF: (505) 325-5667



LAB: (505) 325-1556

## ANALYTICAL REPORT

Date: 10-Mar-99

|                    |                   |                            |                    |
|--------------------|-------------------|----------------------------|--------------------|
| <b>Client:</b>     | Conoco, Inc.      | <b>Client Sample Info:</b> | Fogelson 10-1 SEP  |
| <b>Work Order:</b> | 9902072           | <b>Client Sample ID:</b>   | Center of Pit      |
| <b>Lab ID:</b>     | 9902072-01A       | <b>Matrix:</b>             | SOIL               |
| <b>Project:</b>    | Fogelson 10-1 SEP | <b>Collection Date:</b>    | 2/17/99 8:42:00 AM |
|                    |                   | <b>COC Record:</b>         | 5705               |

| Parameter                      | Result | PQL            | Qual | Units | DF  | Date Analyzed |
|--------------------------------|--------|----------------|------|-------|-----|---------------|
| <b>DIESEL RANGE ORGANICS</b>   |        | <b>SW8015</b>  |      |       |     | Analyst: HR   |
| T/R Hydrocarbons: C10-C28      | 180    | 25             |      | mg/Kg | 1   | 3/3/99        |
| <b>GASOLINE RANGE ORGANICS</b> |        | <b>SW8015</b>  |      |       |     | Analyst: HR   |
| T/R Hydrocarbons: C6-C10       | 250    | 36             |      | mg/Kg | 200 | 2/25/99       |
| <b>BTEX</b>                    |        | <b>SW8021B</b> |      |       |     | Analyst: HR   |
| Benzene                        | 840    | 500            |      | µg/Kg | 500 | 2/22/99       |
| Toluene                        | ND     | 1000           |      | µg/Kg | 500 | 2/22/99       |
| Ethylbenzene                   | 4800   | 500            |      | µg/Kg | 500 | 2/22/99       |
| m,p-Xylene                     | 32000  | 1000           |      | µg/Kg | 500 | 2/22/99       |
| o-Xylene                       | 6200   | 500            |      | µg/Kg | 500 | 2/22/99       |

|                    |                                                         |                                                     |
|--------------------|---------------------------------------------------------|-----------------------------------------------------|
| <b>Qualifiers:</b> | PQL - Practical Quantitation Limit                      | S - Spike Recovery outside accepted recovery limits |
|                    | ND - Not Detected at Practical Quantitation Limit       | R - RPD outside accepted recovery limits            |
|                    | J - Analyte detected below Practical Quantitation Limit | E - Value above quantitation range                  |
|                    | B - Analyte detected in the associated Method Blank     | Surr: - Surrogate                                   |

P.O. BOX 2606 • FARMINGTON, NM 87499

1 of 1

OFF: (505) 325-5667



LAB: (505) 325-1556

## ANALYTICAL REPORT

Date: 10-Mar-99

|                    |                   |                            |                    |
|--------------------|-------------------|----------------------------|--------------------|
| <b>Client:</b>     | Conoco, Inc.      | <b>Client Sample Info:</b> | Fogelson 10-1 SEP  |
| <b>Work Order:</b> | 9902072           | <b>Client Sample ID:</b>   | 4pt. Composite     |
| <b>Lab ID:</b>     | 9902072-02A       | <b>Matrix:</b>             | SOIL               |
| <b>Project:</b>    | Fogelson 10-1 SEP | <b>Collection Date:</b>    | 2/17/99 8:58:00 AM |
|                    |                   | <b>COC Record:</b>         | 5705               |

| Parameter                      | Result | PQL            | Qual | Units | DF   | Date Analyzed |
|--------------------------------|--------|----------------|------|-------|------|---------------|
| <b>DIESEL RANGE ORGANICS</b>   |        | <b>SW8015</b>  |      |       |      | Analyst: HR   |
| T/R Hydrocarbons: C10-C28      | 3400   | 50             |      | mg/Kg | 2    | 3/3/99        |
| <b>GASOLINE RANGE ORGANICS</b> |        | <b>SW8015</b>  |      |       |      | Analyst: HR   |
| T/R Hydrocarbons: C6-C10       | 2600   | 90             |      | mg/Kg | 500  | 2/25/99       |
| <b>BTEX</b>                    |        | <b>SW8021B</b> |      |       |      | Analyst: HR   |
| Benzene                        | 4500   | 1000           |      | µg/Kg | 1000 | 2/24/99       |
| Toluene                        | 27000  | 2000           |      | µg/Kg | 1000 | 2/24/99       |
| Ethylbenzene                   | 9400   | 1000           |      | µg/Kg | 1000 | 2/24/99       |
| m,p-Xylene                     | 120000 | 2000           |      | µg/Kg | 1000 | 2/24/99       |
| o-Xylene                       | 29000  | 1000           |      | µg/Kg | 1000 | 2/24/99       |

|                    |                                                         |                                                     |
|--------------------|---------------------------------------------------------|-----------------------------------------------------|
| <b>Qualifiers:</b> | PQL - Practical Quantitation Limit                      | S - Spike Recovery outside accepted recovery limits |
|                    | ND - Not Detected at Practical Quantitation Limit       | R - RPD outside accepted recovery limits            |
|                    | J - Analyte detected below Practical Quantitation Limit | E - Value above quantitation range                  |
|                    | B - Analyte detected in the associated Method Blank     | Surr: - Surrogate                                   |

P.O. BOX 2606 • FARMINGTON, NM 87499

1 of 1