

District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 S. First St., 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
Department
Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-147
Revised April 3, 2017

Recycling Facility and/or Recycling Containment

Type of Facility: [X] Recycling Facility [X] Recycling Containment*
Type of action: [] Permit [] Registration
[] Modification [X] Extension
[] Closure [X] Other (explain) Request for cessation of operations from 9/23 to 3/24

* At the time C-147 is submitted to the division for a Recycling Containment, a copy shall be provided to the surface owner.

Be advised that approval of this request does not relieve the operator of liability should operations result in pollution of surface water, ground water or the environment. Nor does approval relieve the operator of its responsibility to comply with any other applicable governmental authority's rules, regulations or ordinances.

1. Operator: Enduring Resources IV, LLC (For multiple operators attach page with information) OGRID #:372286
Address: 200 Energy Court, Farmington, New Mexico 87401
Facility or well name (include API# if associated with a well): SEU 2206-20M Water Recycle Facility / Containment
OCD Permit Number: #3RF-30 (For new facilities the permit number will be assigned by the district office)
U/L or Qtr/Qtr SE/4 SE/4 Section 20 Township 22N Range 6W County: Sandoval
Surface Owner: [X] Federal [] State [] Private [] Tribal Trust or Indian Allotment

2. [X] Recycling Facility:
Location of recycling facility (if applicable): Latitude 36.117776 Longitude -107.488825 NAD83
Proposed Use: [X] Drilling* [X] Completion* [X] Production* [X] Plugging *
*The re-use of produced water may NOT be used until fresh water zones are cased and cemented
[] Other, requires permit for other uses. Describe use, process, testing, volume of produced water and ensure there will be no adverse impact on groundwater or surface water.
[X] Fluid Storage
[X] Above ground tanks [X] Recycling containment [] Activity permitted under 19.15.17 NMAC explain type
[] Activity permitted under 19.15.36 NMAC explain type: [] Other explain
[] For multiple or additional recycling containments, attach design and location information of each containment
[] Closure Report (required within 60 days of closure completion): [] Recycling Facility Closure Completion Date:

3. [X] Recycling Containment:
[] Annual Extension after initial 5 years (attach summary of monthly leak detection inspections for previous year)
Center of Recycling Containment (if applicable): Latitude 36.117776 Longitude -107.488825 NAD83
[X] For multiple or additional recycling containments, attach design and location information of each containment
[X] Lined [] Liner type: Thickness 45 mil [X] LLDPE [] HDPE [] PVC [] Other
[X] String-Reinforced
Liner Seams: [X] Welded [X] Factory [] Other Volume: 212,746 bbl Dimensions: L 362' x W 350' x D 25'
[] Recycling Containment Closure Completion Date:

4.

Bonding:

Covered under bonding pursuant to 19.15.8 NMAC per 19.15.34.15(A)(2) NMAC (These containments are limited to only the wells owned or operated by the owners of the containment.)

Bonding in accordance with 19.15.34.15(A)(1). Amount of bond \$ _____ (work on these facilities cannot commence until bonding amounts are approved)

Attach closure cost estimate and documentation on how the closure cost was calculated.

5.

Fencing:

Four foot height, four strands of barbed wire evenly spaced between one and four feet

Alternate. Please specify 8 foot chain link fence

6.

Signs:

12"x 24", 2" lettering, providing Operator's name, site location, and emergency telephone numbers

Signed in compliance with 19.15.16.8 NMAC

7.

Variiances:

Justifications and/or demonstrations that the proposed variance will afford reasonable protection against contamination of fresh water, human health, and the environment.

Check the below box only if a variance is requested:

Variance(s): Requests must be submitted to the appropriate division district for consideration of approval. If a Variance is requested, include the variance information on a separate page and attach it to the C-147 as part of the application.

If a Variance is requested, it must be approved prior to implementation.

8.

Siting Criteria for Recycling Containment

Instructions: The applicant must provide attachments that demonstrate compliance for each siting criteria below as part of the application. Potential examples of the siting attachment source material are provided below under each criteria.

General siting	
Ground water is less than 50 feet below the bottom of the Recycling Containment. NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
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	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Within the area overlying a subsurface mine. - Written confirmation or verification or map from the NM EMNRD-Mining and Minerals Division	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Within an unstable area. - Engineering measures incorporated into the design; NM Bureau of Geology & Mineral Resources; USGS; NM Geological Society; topographic map	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Within a 100-year floodplain. FEMA map	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Within 1000 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	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Within 500 horizontal feet of a spring or a fresh water well used for domestic or stock watering purposes, in existence at the time of initial application. - NM Office of the State Engineer - iWATERS database search; visual inspection (certification) of the proposed site	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Within 500 feet of a wetland. - US Fish and Wildlife Wetland Identification map; topographic map; visual inspection (certification) of the proposed site	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9.

Recycling Facility and/or Containment Checklist:

Instructions: Each of the following items must be attached to the application. Indicate, by a check mark in the box, that the documents are attached.

- Design Plan - based upon the appropriate requirements.
- Operating and Maintenance Plan - based upon the appropriate requirements.
- Closure Plan - based upon the appropriate requirements.
- Site Specific Groundwater Data -
- Siting Criteria Compliance Demonstrations -
- Certify that notice of the C-147 (only) has been sent to the surface owner(s)

10.

Operator Application Certification:

I hereby certify that the information and attachments submitted with this application are true, accurate and complete to the best of my knowledge and belief.

Name (Print): Heather Huntington Title: Permitting Technician

Signature:  Date: 8/1/2023

e-mail address: hhuntington@enduringresources.com Telephone: (970) 749-0124

11.

OCD Representative Signature: Victoria Venegas Approval Date: 08/04/2023

Title: Environmental Specialist OCD Permit Number: 3RF-30

OCD Conditions _____

Additional OCD Conditions on Attachment

Well Name: S ESCAVADA UNIT	Well Location: T22N / R6W / SEC 20 / SWSE / 36.117342 / -107.488712	County or Parish/State: SANDOVAL / NM
Well Number: 361H	Type of Well: OIL WELL	Allottee or Tribe Name: EASTERN NAVAJO
Lease Number: NMNM119281	Unit or CA Name:	Unit or CA Number: NMNM130812A
US Well Number: 3004321310	Well Status: Approved Application for Permit to Drill	Operator: ENDURING RESOURCES LLC

Notice of Intent

Sundry ID: 2743791

Type of Submission: Notice of Intent

Type of Action: Other

Date Sundry Submitted: 08/01/2023

Time Sundry Submitted: 10:05

Date proposed operation will begin: 09/01/2023

Procedure Description: Enduring Resources is requesting a cessation of operations for the SEU 2206 20M (RF-30) Water Recycling Facility (OCD C-147). In accordance with 19.15.34.10.A NMAC, this sundry serves as notice to the surface owner. See attached for the C-147 application submitted to NMOCD.

Surface Disturbance

Is any additional surface disturbance proposed?: No

NOI Attachments

Procedure Description

Cessation_Request_Enduring_20230801100442.pdf

NMOCD_C_147_Permit_Cessation_Request_9.2023_20230801100429.pdf

Well Name: S ESCAVADA UNIT

Well Location: T22N / R6W / SEC 20 / SWSE / 36.117342 / -107.488712

County or Parish/State: SANDOVAL / NM

Well Number: 361H

Type of Well: OIL WELL

Allottee or Tribe Name: EASTERN NAVAJO

Lease Number: NMNM119281

Unit or CA Name:

Unit or CA Number: NMNM130812A

US Well Number: 3004321310

Well Status: Approved Application for Permit to Drill

Operator: ENDURING RESOURCES LLC

Operator

I certify that the foregoing is true and correct. Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction. Electronic submission of Sundry Notices through this system satisfies regulations requiring a

Operator Electronic Signature: KAYLA WHITE

Signed on: AUG 01, 2023 10:04 AM

Name: ENDURING RESOURCES LLC

Title: Staff Engineer

Street Address: 9446 CLERMONT ST

City: THORNTON State: CO

Phone: (720) 768-3575

Email address: KWHITE@CDHCONSULT.COM

Field

Representative Name:

Street Address:

City: State: Zip:

Phone:

Email address:

Enduring Resources, LLC Recycling Facility Inspection Sheet

SITE INFORMATION

Location Name	SE4 2207-20W1	Permit Number	4301 Pod-5	
Section	20	Township	22	Range
		County	Sandoval	
		State	NM	
Time Inspection Began	11:41	Time Inspection Ended	12:00	
Recycling Facility	<input type="checkbox"/>	Recycling Containment	<input checked="" type="checkbox"/>	Water Level (Feet)
				22ft

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

Crew going in and out of location

COMMENTS

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)				Lower Leak Detection (LLD)					
Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	Water Present in LLD?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Total Depth of ULD (ft)		101.1		Total Depth of LLD (ft)					
Depth to Water in ULD (ft)		101.1		Depth to Water in LLD (ft)					
Height of Water in ULD		0		Height of Water in LLD					
Gallons of Water Removed		0		Gallons of Water Removed					

If leak detection contained liquid, was it removed?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
If leak detection contained liquid, was HSE notified?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

BIRD MITIGATION SYSTEM

Audio Bird Deterants are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterants are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Name (Print)	Tina Harris	Date	2-1-23
Name (Signature)		Company	ENDURING RESOURCES



Enduring Resources, LLC Recycling Facility AVO Inspection Sheet

SITE INFORMATION

Location Name SEU 2207-20m Permit Number 4301 Pods
 Section 20 Township 22 Range 6 County Sandoval State NM
 Time Inspection Began 1:15 Time Inspection Ended 1:30
 Recycling Facility Recycling Containment Water Level (Feet) 20 ft

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS Crew going in and out of location

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Audio inspection conducted for pressure and liquid leaks	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Olfactory inspection conducted for unusual or strong odor	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
Total Depth of ULD (ft)	<u>101.0</u>			
Depth to Water in ULD (ft)	<u>101.0</u>			
Height of Water in ULD	<u>18</u>			
Gallons of Water Removed	<u>18</u>			

Lower Leak Detection (LLD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Total Depth of LLD (ft)				
Depth to Water in LLD (ft)				
Height of Water in LLD				
Gallons of Water Removed				

If leak detection contained liquid, was it removed?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
If leak detection contained liquid, was HSE notified?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Name (Print) Tina Harris Date 2-8-23
 Name (Signature) [Signature] Company ENDURING RESOURCES



Enduring Resources, LLC Recycling Facility AVO Inspection Sheet

SITE INFORMATION

Location Name SEU 2207-20 W1 Permit Number 4301/1005
 Section 20 Township 22 Range 6 County Sandoval State NM
 Time Inspection Began 1:30 Time Inspection Ended 1:45
 Recycling Facility Recycling Containment Water Level (Feet) 19 ft

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input checked="" type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS crews going in and out of location

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Audio inspection conducted for pressure and liquid leaks	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Olfactory inspection conducted for unusual or strong odor	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Lower Leak Detection (LLD)

Water Present in ULD? YES <input type="checkbox"/> NO <input type="checkbox"/>	Water Present in LLD? YES <input type="checkbox"/> NO <input type="checkbox"/>
Total Depth of ULD (ft) <u>10/0</u>	Total Depth of LLD (ft)
Depth to Water in ULD (ft)	Depth to Water in LLD (ft)
Height of Water in ULD	Height of Water in LLD
Gallons of Water Removed	Gallons of Water Removed

If leak detection contained liquid, was it removed? YES NO NA
 If leak detection contained liquid, was HSE notified? YES NO NA

COMMENTS Didn't take reading, equipment park in front of leak detection.

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS CDH taking water samples

Name (Print) Tina Harris Date 2-15-23

Name (Signature) [Signature] Company ENDURING RESOURCES



Enduring Resources, LLC Recycling Facility AVO Inspection Sheet

SITE INFORMATION

Location Name SE 4 2207-20M Permit Number 430/10015
 Section 20 Township 22 Range 6 County Sandoval State NM
 Time Inspection Began 11:40 Time Inspection Ended 12:10
 Recycling Facility Recycling Containment Water Level (Feet) 17ft

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS Crew on location

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Audio inspection conducted for pressure and liquid leaks	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Olfactory inspection conducted for unusual or strong odor	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Total Depth of ULD (ft)	<u>101.1</u>			
Depth to Water in ULD (ft)	<input type="text"/>			
Height of Water in ULD	<input type="text"/>			
Gallons of Water Removed	<input type="text"/>			

Lower Leak Detection (LLD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Total Depth of LLD (ft)	<input type="text"/>			
Depth to Water in LLD (ft)	<input type="text"/>			
Height of Water in LLD	<input type="text"/>			
Gallons of Water Removed	<input type="text"/>			

If leak detection contained liquid, was it removed?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
If leak detection contained liquid, was HSE notified?	YES	<input checked="" type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS Equipment parked in front of LD to take readings

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

Name (Print) Tina Harris Date 2-23-23

Name (Signature) [Signature] Company ENDURING RESOURCES



Enduring Resources, LLC Recycling Facility AVO Inspection Sheet

SITE INFORMATION

Location Name	SEU 2207 20M	Permit Number	4301605		
Section	20	Township	22	Range	
			6	County	
				Sandoval	
				State	
				NM	
Time Inspection Began	2:09		Time Inspection Ended	2:30	
Recycling Facility	<input type="checkbox"/>	Recycling Containment	<input checked="" type="checkbox"/>		Water Level (Feet)
					17 ft

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS Crew working on curstone

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Audio inspection conducted for pressure and liquid leaks	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Olfactory inspection conducted for unusual or strong odor	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)				Lower Leak Detection (LLD)			
Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	Water Present in ULD?	YES	<input type="checkbox"/>
						NO	<input type="checkbox"/>
Total Depth of ULD (ft)	101.			Total Depth of LLD (ft)			
Depth to Water in ULD (ft)	101			Depth to Water in LLD (ft)			
Height of Water in ULD	10			Height of Water in LLD			
Gallons of Water Removed	0			Gallons of Water Removed			

If leak detection contained liquid, was it removed?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
If leak detection contained liquid, was HSE notified?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS Didn't take reading, my tubing is bent, need new tubing.

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS Bird's eye need to be replace, too windy today

Name (Print) Tina Harris	Date 3-1-23
Name (Signature) <i>Tina Harris</i>	Company ENDURING RESOURCES



Enduring Resources, LLC Recycling Facility AVO Inspection Sheet

SITE INFORMATION

Location Name SEU 2207-20M Permit Number 4301Pd-5
 Section 20 Township 22 Range 6 County Sandoval State NM
 Time Inspection Began 2:05 Time Inspection Ended 2:20
 Recycling Facility Recycling Containment Water Level (Feet) 17 ft

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS leaves going in and out of location

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Audio inspection conducted for pressure and liquid leaks	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Olfactory inspection conducted for unusual or strong odor	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Water Present in ULD?	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>
Total Depth of ULD (ft)	<u>101.7</u>			
Depth to Water in ULD (ft)	<u>100.7</u>			
Height of Water in ULD	<u>3:11</u>			
Gallons of Water Removed	<u>0</u>			

Lower Leak Detection (LLD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Total Depth of LLD (ft)				
Depth to Water in LLD (ft)				
Height of Water in LLD				
Gallons of Water Removed				

If leak detection contained liquid, was it removed?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
If leak detection contained liquid, was HSE notified?	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS Not enough water to remove

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Name (Print) Tina Harris Date 3-8-23

Name (Signature) [Signature] Company ENDURING RESOURCES



Enduring Resources, LLC Recycling Facility AVO Inspection Sheet

SITE INFORMATION

Location Name 564 2207-2041 Permit Number 4301 Pod 5
 Section 20 Township 22 Range 6 County Sandoval State NM
 Time Inspection Began 12:50 Time Inspection Ended 1:15
 Recycling Facility Recycling Containment Water Level (Feet) 17 ft

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Audio inspection conducted for pressure and liquid leaks	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Olfactory inspection conducted for unusual or strong odor	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Lower Leak Detection (LLD)

Water Present in ULD? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Water Present in LLD? YES <input type="checkbox"/> NO <input type="checkbox"/>
Total Depth of ULD (ft) <u>101</u>	Total Depth of LLD (ft) <input type="checkbox"/>
Depth to Water in ULD (ft) <u>101</u>	Depth to Water in LLD (ft) <input type="checkbox"/>
Height of Water in ULD <u>0</u>	Height of Water in LLD <input type="checkbox"/>
Gallons of Water Removed <u>0</u>	Gallons of Water Removed <input type="checkbox"/>

If leak detection contained liquid, was it removed? YES NO NA
 If leak detection contained liquid, was HSE notified? YES NO NA

Didn't take reading due to mud

COMMENTS

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Name (Print) Tina Harris Date 3-16-23

Name (Signature) *Tina Harris* Company ENDURING RESOURCES



Enduring Resources, LLC Recycling Facility AVO Inspection Sheet

SITE INFORMATION

Location Name SEU 2207-20M Permit Number U301 Pad 5
 Section 20 Township 22 Range 6 County Sandoval State NM
 Time Inspection Began 11:40 Time Inspection Ended 12:00
 Recycling Facility Recycling Containment Water Level (Feet) 17ft

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input checked="" type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Audio inspection conducted for pressure and liquid leaks	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Olfactory inspection conducted for unusual or strong odor	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
Total Depth of ULD (ft)	<u>101.0</u>			
Depth to Water in ULD (ft)	<u>101.</u>			
Height of Water in ULD				
Gallons of Water Removed				

Lower Leak Detection (LLD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Total Depth of LLD (ft)				
Depth to Water in LLD (ft)				
Height of Water in LLD				
Gallons of Water Removed				

If leak detection contained liquid, was it removed?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
If leak detection contained liquid, was HSE notified?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Didn't take readings due to mud,

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

All looks good, getting alot of moisture

Name (Print) Tina Harris Date 3-22-23

Name (Signature) [Signature] Company ENDURING RESOURCES



Enduring Resources, LLC Recycling Facility AVO Inspection Sheet

SITE INFORMATION

Location Name SEU 2207 20M Permit Number 1130/ Pod-5
 Section 20 Township 22 Range 6 County Sandoval State NM
 Time Inspection Began 10:15 Time Inspection Ended 10:45
 Recycling Facility Recycling Containment Water Level (Feet) 17ft

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS Crews going in and out of location

INSPECTION INFORMATION FOR RECYLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Audio inspection conducted for pressure and liquid leaks	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Olfactory inspection conducted for unusual or strong odor	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
Total Depth of ULD (ft)	<u>101.0</u>			
Depth to Water in ULD (ft)	<u>101.0</u>			
Height of Water in ULD	<u>0</u>			
Gallons of Water Removed	<u>0</u>			

Lower Leak Detection (LLD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Total Depth of LLD (ft)	<input type="text"/>			
Depth to Water in LLD (ft)	<input type="text"/>			
Height of Water in LLD	<input type="text"/>			
Gallons of Water Removed	<input type="text"/>			

If leak detection contained liquid, was it removed?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
If leak detection contained liquid, was HSE notified?	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Name (Print) Tina Harris Date 3-30-23
 Name (Signature) [Signature] Company ENDURING RESOURCES



Enduring Resources, LLC Recycling Facility AVO Inspection Sheet

SITE INFORMATION

Location Name SEU 2207-20M Permit Number 4301Bd-5
 Section 20 Township 27 Range 6 County Sandoval State NM
 Time Inspection Began 10:47 Time Inspection Ended 11:15
 Recycling Facility Recycling Containment Water Level (Feet) 17ft

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Audio inspection conducted for pressure and liquid leaks	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Olfactory inspection conducted for unusual or strong odor	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
Total Depth of ULD (ft)				<u>101.0</u>
Depth to Water in ULD (ft)				<u>101.0</u>
Height of Water in ULD				<u>0</u>
Gallons of Water Removed				<u>0</u>

Lower Leak Detection (LLD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Total Depth of LLD (ft)				
Depth to Water in LLD (ft)				
Height of Water in LLD				
Gallons of Water Removed				

If leak detection contained liquid, was it removed?	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
If leak detection contained liquid, was HSE notified?	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Replaced 3 birds eye

Name (Print) Tina Harris Date 4-5-23

Name (Signature) [Signature] Company ENDURING RESOURCES



Enduring Resources, LLC Recycling Facility AVO Inspection Sheet

SITE INFORMATION

Location Name SEC 2207-20 M Permit Number 4301 Pcd-5
 Section 20 Township 22 Range 6 County Sandoval State NM
 Time Inspection Began 1:31 Time Inspection Ended 1:50
 Recycling Facility Recycling Containment Water Level (Feet) 17 FT

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runoff?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Audio inspection conducted for pressure and liquid leaks	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Olfactory inspection conducted for unusual or strong odor	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Water Present in ULD?	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>
Total Depth of ULD (ft)		<u>101.0</u>		
Depth to Water in ULD (ft)		<u>101.0</u>		
Height of Water in ULD		<u>0</u>		
Gallons of Water Removed		<u>0</u>		

Lower Leak Detection (LLD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Total Depth of LLD (ft)				
Depth to Water in LLD (ft)				
Height of Water in LLD				
Gallons of Water Removed				

If leak detection contained liquid, was it removed?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
If leak detection contained liquid, was HSE notified?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Name (Print) Tina Harris

Date 4-13-23

Name (Signature) [Signature]

Company ENDURING RESOURCES



Enduring Resources, LLC Recycling Facility AVO Inspection Sheet

SITE INFORMATION

Location Name SE4 2207-20 M Permit Number 4301-Pod 5
 Section 20 Township 22 Range 6 County Sandoval State NM
 Time Inspection Began 12:30 Time Inspection Ended 1:15
 Recycling Facility Recycling Containment Water Level (Feet) 17.5

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Audio inspection conducted for pressure and liquid leaks	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Olfactory inspection conducted for unusual or strong odor	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Lower Leak Detection (LLD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Total Depth of ULD (ft)		<u>101.0</u>			Total Depth of LLD (ft)				
Depth to Water in ULD (ft)		<u>101.0</u>			Depth to Water in LLD (ft)				
Height of Water in ULD		<u>0</u>			Height of Water in LLD				
Gallons of Water Removed		<u>0</u>			Gallons of Water Removed				

If leak detection contained liquid, was it removed? YES NO NA
 If leak detection contained liquid, was HSE notified? YES NO NA

COMMENTS

BIRD MITIGATION SYSTEM

Audio Bird Deterants are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterants are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Name (Print) Tina Harris

Date 4-20-23

Name (Signature) [Signature]

Company ENDURING RESOURCES



Enduring Resources, LLC Recycling Facility AVO Inspection Sheet

SITE INFORMATION

Location Name SEU 2207 20M Permit Number 4301 Pod-5
 Section 20 Township 27 Range 6 County Sandoval State NM
 Time Inspection Began 10:30 Time Inspection Ended 10:50
 Recycling Facility Recycling Containment Water Level (Feet) 16.5 ft

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS closed gate.

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Audio inspection conducted for pressure and liquid leaks	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Olfactory inspection conducted for unusual or strong odor	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Lower Leak Detection (LLD)

Water Present in ULD? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Water Present in LLD? YES <input type="checkbox"/> NO <input type="checkbox"/>
Total Depth of ULD (ft) <u>10'</u>	Total Depth of LLD (ft) <input type="text"/>
Depth to Water in ULD (ft) <u>10'</u>	Depth to Water in LLD (ft) <input type="text"/>
Height of Water in ULD <u>0</u>	Height of Water in LLD <input type="text"/>
Gallons of Water Removed <u>0</u>	Gallons of Water Removed <input type="text"/>

If leak detection contained liquid, was it removed? YES NO NA
 If leak detection contained liquid, was HSE notified? YES NO NA

COMMENTS

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS Replaced 2 bird's eye

Name (Print) Tina Harris Date 4-26-23

Name (Signature) [Signature] Company ENDURING RESOURCES



Enduring Resources, LLC Recycling Facility AVO Inspection Sheet

SITE INFORMATION

Location Name SEU 2207-20M Permit Number 4301 Hpt 5
 Section 20 Township 22 Range 6 County Sandoval State NM
 Time Inspection Began 9:15 Time Inspection Ended 9:30
 Recycling Facility Recycling Containment Water Level (Feet) 16.5

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and In good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS Crew going in and out of location

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Audio inspection conducted for pressure and liquid leaks	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Olfactory inspection conducted for unusual or strong odor	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
Total Depth of ULD (ft)	<u>101.0</u>			
Depth to Water in ULD (ft)	<u>101.0</u>			
Height of Water in ULD	<u>0</u>			
Gallons of Water Removed	<u>0</u>			

Lower Leak Detection (LLD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Total Depth of LLD (ft)	<u> </u>			
Depth to Water in LLD (ft)	<u> </u>			
Height of Water in LLD	<u> </u>			
Gallons of Water Removed	<u> </u>			

If leak detection contained liquid, was it removed? YES NO NA
 If leak detection contained liquid, was HSE notified? YES NO NA

COMMENTS

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Name (Print) Tina Harris

Date 5-3-23

Name (Signature) *Tina Harris*

Company ENDURING RESOURCES



Enduring Resources, LLC Recycling Facility AVO Inspection Sheet

SITE INFORMATION

Location Name SEU 2207-20M Permit Number 430180d-5
 Section 20 Township 22 Range 6 County Sandoval State NM
 Time Inspection Began 10:30 Time Inspection Ended 11:15
 Recycling Facility Recycling Containment Water Level (Feet) 16.5 ft

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS Crew going in and out of location

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Audio inspection conducted for pressure and liquid leaks	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Olfactory inspection conducted for unusual or strong odor	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Lower Leak Detection (LLD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Total Depth of ULD (ft)		<u>10.5</u>			Total Depth of LLD (ft)				
Depth to Water in ULD (ft)		<u>10.0</u>			Depth to Water in LLD (ft)				
Height of Water in ULD		<u>0</u>			Height of Water in LLD				
Gallons of Water Removed		<u>0</u>			Gallons of Water Removed				

If leak detection contained liquid, was it removed? YES NO NA
 If leak detection contained liquid, was HSE notified? YES NO NA

COMMENTS

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS Replace tubing for taking measurements.

Name (Print) Tina Harris Date 5-10-23
 Name (Signature) [Signature] Company ENDURING RESOURCES

		Enduring Resources, LLC	
Recycling Facility AVO Inspection Sheet			
SITE INFORMATION			
Location Name	<u>SEU 2707-20M</u>	Permit Number	<u>4301-16d 5</u>
Section	<u>20</u>	Township	<u>22</u>
		Range	<u>6</u>
		County	<u>Sandoval</u>
		State	<u>NM</u>
Time Inspection Began	<u>9:55</u>	Time Inspection Ended	<u>10:20</u>
Recycling Facility	<input type="checkbox"/>	Recycling Containment	<input checked="" type="checkbox"/>
		Water Level (Feet)	<u>16 ft</u>
GENERAL INFORMATION			
Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO <input type="checkbox"/> NA <input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO <input type="checkbox"/> NA <input type="checkbox"/>
Gates are Closed and locked	YES	<input checked="" type="checkbox"/>	NO <input type="checkbox"/> NA <input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO <input type="checkbox"/> NA <input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO <input checked="" type="checkbox"/> NA <input type="checkbox"/>
COMMENTS			
INSPECTION INFORMATION FOR RECYCLING CONTAINMENT			
Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO <input type="checkbox"/> NA <input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input type="checkbox"/>	NO <input checked="" type="checkbox"/> NA <input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO <input type="checkbox"/> NA <input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input type="checkbox"/>	NO <input type="checkbox"/> NA <input checked="" type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO <input checked="" type="checkbox"/> NA <input type="checkbox"/>
Audio inspection conducted for pressure and liquid leaks	YES	<input checked="" type="checkbox"/>	NO <input type="checkbox"/> NA <input type="checkbox"/>
Olfactory inspection conducted for unusual or strong odor	YES	<input checked="" type="checkbox"/>	NO <input type="checkbox"/> NA <input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO <input type="checkbox"/> NA <input type="checkbox"/>
Upper Leak Detection (ULD)		Lower Leak Detection (LLD)	
Water Present in ULD?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Water Present in ULD?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Total Depth of ULD (ft)	<u>101.0</u>	Total Depth of LLD (ft)	
Depth to Water in ULD (ft)	<u>701</u>	Depth to Water in LLD (ft)	
Height of Water in ULD	<u>0</u>	Height of Water in LLD	
Gallons of Water Removed	<u>0</u>	Gallons of Water Removed	
If leak detection contained liquid, was it removed?	YES <input type="checkbox"/> NO <input type="checkbox"/> NA <input checked="" type="checkbox"/>		
If leak detection contained liquid, was HSE notified?	YES <input type="checkbox"/> NO <input type="checkbox"/> NA <input checked="" type="checkbox"/>		
COMMENTS			
BIRD MITIGATION SYSTEM			
Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO <input type="checkbox"/> NA <input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO <input type="checkbox"/> NA <input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO <input type="checkbox"/> NA <input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO <input type="checkbox"/> NA <input checked="" type="checkbox"/>
COMMENTS			
Name (Print)	<u>Tina Harris</u>		Date <u>5-17-23</u>
Name (Signature)	<u>[Signature]</u>		Company <u>ENDURING RESOURCES</u>



Enduring Resources, LLC Recycling Facility AVO Inspection Sheet

SITE INFORMATION

Location Name SEY 2207-20M Permit Number 4301 Pod-5
 Section 20 Township 22 Range 6 County Sandoval State NM
 Time Inspection Began 1:30 Time Inspection Ended 2:00
 Recycling Facility Recycling Containment Water Level (Feet) 16.5 ft

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Audio inspection conducted for pressure and liquid leaks	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Olfactory inspection conducted for unusual or strong odor	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Lower Leak Detection (LLD)

Water Present in ULD? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Water Present in LLD? YES <input type="checkbox"/> NO <input type="checkbox"/>
Total Depth of ULD (ft) <u>101.0</u>	Total Depth of LLD (ft) <u> </u>
Depth to Water in ULD (ft) <u>101.0</u>	Depth to Water in LLD (ft) <u> </u>
Height of Water in ULD <u>8</u>	Height of Water in LLD <u> </u>
Gallons of Water Removed <u>8</u>	Gallons of Water Removed <u> </u>

If leak detection contained liquid, was it removed?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If leak detection contained liquid, was HSE notified?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Name (Print) Tina Harris Date 5-24-23

Name (Signature) [Signature] Company ENDURING RESOURCES



Enduring Resources, LLC Recycling Facility AVO Inspection Sheet

SITE INFORMATION

Location Name SEU 2207-20W Permit Number 4301 Pod 5
 Section 20 Township 22 Range 4 County Sandoval State NM
 Time Inspection Began 12:40 Time Inspection Ended 1:10
 Recycling Facility Recycling Containment Water Level (Feet) 16.5 ft

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS Crew going in and out of location

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Audio inspection conducted for pressure and liquid leaks	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Olfactory inspection conducted for unusual or strong odor	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Lower Leak Detection (LLD)

Water Present in ULD? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Water Present in LLD? YES <input type="checkbox"/> NO <input type="checkbox"/>
Total Depth of ULD (ft) <u>101.0</u>	Total Depth of LLD (ft) <input type="checkbox"/>
Depth to Water in ULD (ft) <u>101.0</u>	Depth to Water in LLD (ft) <input type="checkbox"/>
Height of Water in ULD <u>0</u>	Height of Water in LLD <input type="checkbox"/>
Gallons of Water Removed <u>0</u>	Gallons of Water Removed <input type="checkbox"/>

If leak detection contained liquid, was it removed?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
If leak detection contained liquid, was HSE notified?	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Name (Print) Tina Harris Date 6-1-23

Name (Signature) [Signature] Company ENDURING RESOURCES



Enduring Resources, LLC Recycling Facility AVO Inspection Sheet

SITE INFORMATION

Location Name SELL 2207-20M Permit Number 4301 Pod 5
 Section 20 Township 22 Range 6 County Sandoval State NM
 Time Inspection Began 8:05 Time Inspection Ended 8:35
 Recycling Facility Recycling Containment Water Level (Feet) 15 ft

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS Crew going in and out of location

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Audio inspection conducted for pressure and liquid leaks	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Olfactory inspection conducted for unusual or strong odor	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Lower Leak Detection (LLD)

Water Present in ULD? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Water Present in LLD? YES <input type="checkbox"/> NO <input type="checkbox"/>
Total Depth of ULD (ft) <u>101.0</u>	Total Depth of LLD (ft) <u> </u>
Depth to Water in ULD (ft) <u>101.0</u>	Depth to Water in LLD (ft) <u> </u>
Height of Water in ULD <u>0</u>	Height of Water in LLD <u> </u>
Gallons of Water Removed <u>0</u>	Gallons of Water Removed <u> </u>

If leak detection contained liquid, was it removed? YES NO NA
 If leak detection contained liquid, was HSE notified? YES NO NA

COMMENTS

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Name (Print) Tina Harris Date 6-7-23

Name (Signature) [Signature] Company ENDURING RESOURCES



Enduring Resources, LLC Recycling Facility AVO Inspection Sheet

SITE INFORMATION

Location Name <u>SEU 2267-20M</u>	Permit Number <u>4301 Pod-5</u>
Section <u>20</u> Township <u>22</u> Range <u>6</u> County <u>Sandoval</u> State <u>NM</u>	
Time Inspection Began <u>12:00</u>	Time Inspection Ended <u>12:20</u>
Recycling Facility <input type="checkbox"/>	Recycling Containment <input checked="" type="checkbox"/>
Water Level (Feet) <u>16ft</u>	

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS Crew going in and out of location

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
Audio inspection conducted for pressure and liquid leaks	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Olfactory inspection conducted for unusual or strong odor	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
Total Depth of ULD (ft)				<u>10'</u>
Depth to Water in ULD (ft)				<u>10'</u>
Height of Water in ULD				<u>0</u>
Gallons of Water Removed				<u>0</u>

Lower Leak Detection (LLD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Total Depth of LLD (ft)				
Depth to Water in LLD (ft)				
Height of Water in LLD				
Gallons of Water Removed				

If leak detection contained liquid, was it removed?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
If leak detection contained liquid, was HSE notified?	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Name (Print) Tina Harris

Date 6-15-23

Name (Signature) [Signature]

Company **ENDURING RESOURCES**



Enduring Resources, LLC Recycling Facility AVO Inspection Sheet

SITE INFORMATION

Location Name SEU 2207 20 M Permit Number 4301 Abd5
 Section 20 Township 22 Range 6 County sandoval State NM
 Time Inspection Began 10:35 Time Inspection Ended 11:10
 Recycling Facility Recycling Containment Water Level (Feet) 16.7

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS Crew going in and out of location

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Audio inspection conducted for pressure and liquid leaks	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Olfactory inspection conducted for unusual or strong odor	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Lower Leak Detection (LLD)

Water Present in ULD? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> Total Depth of ULD (ft) <u>10.7</u> Depth to Water in ULD (ft) <u>10.1</u> Height of Water in ULD <u>0</u> Gallons of Water Removed <u>0</u>	Water Present in ULD? YES <input type="checkbox"/> NO <input type="checkbox"/> Total Depth of LLD (ft) _____ Depth to Water in LLD (ft) _____ Height of Water in LLD _____ Gallons of Water Removed _____
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If leak detection contained liquid, was it removed? YES NO NA
 If leak detection contained liquid, was HSE notified? YES NO NA

COMMENTS

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Name (Print) Tina Harris

Date 6-21-23

Name (Signature) [Signature]

Company **ENDURING RESOURCES**



Enduring Resources, LLC Recycling Facility AVO Inspection Sheet

SITE INFORMATION

Location Name SE4 2207-20M Permit Number 4301 Ped 5
 Section 20 Township 22 Range 10 County Sandoval State NM
 Time Inspection Began 11:30 Time Inspection Ended 12:00
 Recycling Facility Recycling Containment Water Level (Feet) 15 ft

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Audio inspection conducted for pressure and liquid leaks	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Odactory inspection conducted for unusual or strong odor	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
Total Depth of ULD (ft)	<u>101.0</u>			
Depth to Water in ULD (ft)	<u>101.1</u>			
Height of Water in ULD	<u>0</u>			
Gallons of Water Removed	<u>0</u>			

Lower Leak Detection (LLD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Total Depth of LLD (ft)				
Depth to Water in LLD (ft)				
Height of Water in LLD				
Gallons of Water Removed				

If leak detection contained liquid, was it removed?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
If leak detection contained liquid, was HSE notified?	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Name (Print) Tina Harris Date 6-28-23

Name (Signature) [Signature] Company ENDURING RESOURCES



Enduring Resources, LLC Recycling Facility AVO Inspection Sheet

SITE INFORMATION

Location Name SE4 2207-20W1 Permit Number 4301 Ref-5
 Section 20 Township 22 Range 6 County Sandoval State NM
 Time Inspection Began 8:30 Time Inspection Ended 8:50
 Recycling Facility Recycling Containment Water Level (Feet) 15 ft

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Audio inspection conducted for pressure and liquid leaks	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Olfactory inspection conducted for unusual or strong odor	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Lower Leak Detection (LLD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>		
Total Depth of ULD (ft)		<u>101</u>				
Depth to Water in ULD (ft)		<u>101</u>				
Height of Water in ULD		<u>0</u>				
Gallons of Water Removed		<u>0</u>				

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>		
Total Depth of LLD (ft)						
Depth to Water in LLD (ft)						
Height of Water in LLD						
Gallons of Water Removed						

If leak detection contained liquid, was it removed?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input checked="" type="checkbox"/>
If leak detection contained liquid, was HSE notified?	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Name (Print) Tina Harris Date 8-6-23

Name (Signature) [Signature] Company ENDURING RESOURCES



Enduring Resources, LLC Recycling Facility AVO Inspection Sheet

SITE INFORMATION

Location Name SELL 2207-2011 Permit Number 4301 Pool-5
 Section 20 Township 22 Range 6 County Sandoval State NM
 Time Inspection Began 10:15 Time Inspection Ended _____
 Recycling Facility Recycling Containment Water Level (Feet) 15 ft

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Audio inspection conducted for pressure and liquid leaks	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Olfactory inspection conducted for unusual or strong odor	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
Total Depth of ULD (ft)				<u>10.0</u>
Depth to Water in ULD (ft)				<u>10.0</u>
Height of Water in ULD				<u>0</u>
Gallons of Water Removed				<u>0</u>

Lower Leak Detection (LLD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Total Depth of LLD (ft)				
Depth to Water in LLD (ft)				
Height of Water in LLD				
Gallons of Water Removed				

If leak detection contained liquid, was it removed?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
If leak detection contained liquid, was HSE notified?	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Name (Print) Tina Harris

Date 7-13-23

Name (Signature) [Signature]

Company ENDURING RESOURCES



Enduring Resources, LLC Recycling Facility AVO Inspection Sheet

SITE INFORMATION

Location Name SFU 2207-20M Permit Number 4301 Pod 5
 Section 20 Township 27 Range 6 County Sandoval State NM
 Time Inspection Began 10:25 Time Inspection Ended 10:50
 Recycling Facility Recycling Containment Water Level (Feet) 15ft

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

INSPECTION INFORMATION FOR RECYCLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Audio inspection conducted for pressure and liquid leaks	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Olfactory inspection conducted for unusual or strong odor	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
Total Depth of ULD (ft)	<u>101.0</u>			
Depth to Water in ULD (ft)	<u>101.0</u>			
Height of Water in ULD	<u>0</u>			
Gallons of Water Removed	<u>0</u>			

Lower Leak Detection (LLD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Total Depth of LLD (ft)	<input type="text"/>			
Depth to Water in LLD (ft)	<input type="text"/>			
Height of Water in LLD	<input type="text"/>			
Gallons of Water Removed	<input type="text"/>			

If leak detection contained liquid, was it removed?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
If leak detection contained liquid, was HSE notified?	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Name (Print) Tina Harris

Date 7-21-23

Name (Signature) [Signature]

Company **ENDURING RESOURCES**



Enduring Resources, LLC Recycling Facility AVO Inspection Sheet

SITE INFORMATION

Location Name SEU 2207-20M Permit Number 4301 Pcd 5
 Section 20 Township 22 Range 6e County Sandoval State NM
 Time Inspection Began 9:08 Time Inspection Ended 9:25
 Recycling Facility Recycling Containment Water Level (Feet) 15 ft

GENERAL INFORMATION

Containment Currently Contains Fluids	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Fencing is in Good condition and Functional	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Gates are Closed and locked	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility sign is visible and in good condition	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Signs of Surface Water Runon?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>

COMMENTS

INSPECTION INFORMATION FOR RECYLING CONTAINMENT

Containment has a minimum of three feet of freeboard	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Containment water surface is free of visible signs of oil	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Injection and withdrawal of water is done through a header	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Oil absorbent booms are on-site and in good condition	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>
Is there evidence of a leak in the liner above the waterline	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	NA	<input type="checkbox"/>
Audio inspection conducted for pressure and liquid leaks	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Olfactory inspection conducted for unusual or strong odor	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Site is free of evidence of leaks, spills or releases	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>

Upper Leak Detection (ULD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
Total Depth of ULD (ft)		<u>101.0</u>		
Depth to Water in ULD (ft)		<u>101.0</u>		
Height of Water in ULD		<u>0</u>		
Gallons of Water Removed		<u>0</u>		

Lower Leak Detection (LLD)

Water Present in ULD?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Total Depth of LLD (ft)				
Depth to Water in LLD (ft)				
Height of Water in LLD				
Gallons of Water Removed				

If leak detection contained liquid, was it removed? YES NO NA
 If leak detection contained liquid, was HSE notified? YES NO NA

COMMENTS

BIRD MITIGATION SYSTEM

Audio Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Visual Bird Deterrents are present and in working order	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
Facility was inspected, and no evidence of bird mortality was found	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input type="checkbox"/>
If evidence of bird mortality was found, HSE was notified	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	NA	<input checked="" type="checkbox"/>

COMMENTS

Name (Print) Tina Harris

Date 7-27-23

Name (Signature) [Signature]

Company **ENDURING RESOURCES**



ENDURING RESOURCES IV LLC

200 Energy Court Farmington, NM 87401
Field Office: 505.636.9720 | Main Office: 303.573.1222

Enduring Resources, LLC
SEU 2206 20M – 3RF-30
Recycling Facility/Containment
Cessation Request for 19.15.34 NMAC

New Mexico Oil Conservation Division
Attn: Victoria Venegas

Enduring Resources is requesting a cessation of operations for the SEU 2206 20M (RF-30) Water Recycling Facility. In accordance with 19.15.34.13.C NMAC, *“A recycling containment shall be deemed to have ceased operations if less than twenty percent of the total fluid capacity is used every six months following the first withdrawal of produced water for use. The operator must report cessation of operations to the division.”*

Enduring is requesting a cessation of operations from 9/2023 through the end of 2/2024. The division may grant an extension to this determination of cessation of operations not to exceed six months. Enduring has included records for the last 6 months of inspections at this facility.

Thank you,

Heather Huntington
Permitting Technician
Enduring Resources, LLC.
hhuntington@enduringresources.com

Venegas, Victoria, EMNRD

From: Venegas, Victoria, EMNRD
Sent: Friday, August 4, 2023 1:59 PM
To: Heather Huntington
Cc: Kayla White
Subject: 3RF-30 - SEU 2206 - 20M FACILITY ID [fVF1828850052]
Attachments: C-147 3RF-30 - SEU 2206 - 20M FACILITY ID [fVF1828850052].pdf

3RF-30 - SEU 2206 - 20M FACILITY ID [fVF1828850052]

Good afternoon Ms. Huntington,

NMOCD has reviewed the cessation of operations extension request for 3RF-30 - SEU 2206 - 20M FACILITY ID [fVF1828850052], received from [372286] ENDURING RESOURCES, LLC on 08/04/2023. The extension of the cessation of operations is approved with the following conditions of approval:

- 3RF-30 - SEU 2206 - 20M FACILITY ID [fVF1828850052] registration/permit expires on 10/04/2023.
- If [372286] ENDURING RESOURCES, LLC wishes to extend the registration/permit past October 4, 2023, a registration/permit extension request must be submitted to OCD. The extension request should be submitted no later than September 4, 2023.
- 3RF-30 - SEU 2206 - 20M FACILITY ID [fVF1828850052] extension of cessation of operations is approved from September 1/2023 to March 1/2024. **However, if after this 6-month period, the containment was not utilized at a minimum of 20% fluid capacity, no additional extensions would be granted, and the operator would be directed to remove all fluids and proceed with the closure requirements.**
- [372286] ENDURING RESOURCES, LLC will maintain a liquid level in the containment that is at least equal to the weight of the liner plus 20%. [372286] ENDURING RESOURCES, LLC may maintain a higher liquid level if they choose.
- [372286] ENDURING RESOURCES, LLC will provide written notice to [OCD Online](#) at least 72 hours, but no more than one week, prior to the recommencement of operations. Recommencement of recycling operations means that the operator plans to resume moving fluids through the containment and discharging fluids from the containment.
 - At the resumption of recycling operations, [372286] ENDURING RESOURCES, LLC is required to perform an incremental fluid level test for containment liquid levels above the minimum liquid level.
 - [372286] ENDURING RESOURCES, LLC will fill the containment. [372286] ENDURING RESOURCES, LLC will pause filling operations at every 10% of total fluid capacity above the minimum level.
 - [372286] ENDURING RESOURCES, LLC will maintain the liquid level for each 10% volume increase for 24 hours and inspect and operate the leak detection system at the end of the 24-hour period.
 - If there are no liquids present in the leak detection system, [372286] ENDURING RESOURCES, LLC may proceed to fill the next 10% volume and repeat the process until the containment full design capacity minus the 3-feet of freeboard is reached.
 - If liquids are present, [372286] ENDURING RESOURCES, LLC should immediately cease the incremental fill test and perform a liner inspection. [372286] ENDURING RESOURCES, LLC should provide written notice of the fluid detection and liner inspection findings to OCD via [OCD Online](#) using a C-147 (long form) with the "Other" box checked and "Notice of fluid detection" written as the explanation of "Other."
 - Upon notification of fluid detection in the leak detection system, the OCD will verify the source of water (condensation versus produced water).
 - If the detected fluid is confirmed to be condensation, the OCD will issue a written approval to proceed with the incremental fluid level test.

- If the detected fluid is confirmed to be produced water, [372286] ENDURING RESOURCES, LLC must comply with 19.15.34.13 NMAC [372286] ENDURING RESOURCES, LLC must provide written notification to [OCD Online](#) on the actions taken to comply with 19.15.34.13 NMAC.
 - After fluid is detected in the leak detection system, the incremental fill test cannot continue until after a written approval to proceed is issued by the OCD.
 - [372286] ENDURING RESOURCES, LLC must submit copies of the detailed containment inspection records for the prior three months and a report detailing the incremental fluid level test process and results through the [OCD Online](#) system using a C-147 (long form) with the "Other" box checked. "Resumption of Operations - Incremental Fluid Level Test" should be written as the explanation of "Other." Form C-147 must be completed and include information in sections 1 General Information, 2 Recycling Facility, 3 Recycling Containment, 4 Bonding, and 10 Operator Application Certification. Section 9 Recycling Facility and/or Containment Checklist may also need to be partially completed. Operators should verify that the resumption of operations notification does not result in any changes to the recycling containment operating and maintenance plan or the closure plan. If the resumption of operations will affect the operating and maintenance plan or closure plan, operators should check those boxes in section 9 and provide updated plans or plan addendums as attachments to the C-147.
- [372286] ENDURING RESOURCES, LLC will continue to operate, maintain, and close 3RF-30 - SEU 2206 - 20M FACILITY ID [fVF1828850052] in compliance with 19.15.34 NMAC, to include but not limited detailed inspection records, removal of trash/oil from containment, and monthly C-148 reporting (even if there is zero activity).
 - A minimum of 3-feet freeboard must always be maintained in the recycling containment during operations.

Please let me know if you have any questions or concerns.

Regards,

Victoria Venegas • Environmental Specialist

Environmental Bureau

EMNRD - Oil Conservation Division

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<https://www.emnrd.nm.gov/ocd/>



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State of New Mexico
Energy, Minerals and Natural Resources
Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

CONDITIONS

Action 246574

CONDITIONS

Operator: ENDURING RESOURCES, LLC 6300 S Syracuse Way, Suite 525 Centennial, CO 80111	OGRID: 372286
	Action Number: 246574
	Action Type: [C-147] Water Recycle Long (C-147L)

CONDITIONS

Created By	Condition	Condition Date
vvenegas	<ul style="list-style-type: none"> • 3RF-30 - SEU 2206 - 20M FACILITY ID [FVF1828850052] registration/permit expires on 10/04/2023. • If [372286] ENDURING RESOURCES, LLC wishes to extend the registration/permit past October 4, 2023, a registration/permit extension request must be submitted to OCD. The extension request should be submitted no later than September 4, 2023. • 3RF-30 - SEU 2206 - 20M FACILITY ID [FVF1828850052] extension of cessation of operations is approved from September 1/2023 to March 1/2024. However, if after this 6-month period, the containment was not utilized at a minimum of 20% fluid capacity, no additional extensions would be granted, and the operator would be directed to remove all fluids and proceed with the closure requirements 	8/4/2023