

On 2/2/2022 the North Lea 3 Federal #1H well flared 100 mcf due to the compressor being down.

There is a meter on the flare line that shows how the mcf being flared.



Current Report Date: 3/10/22 3:24 PM
 Collection Date: 3/10/22 3:21 PM
 Last Calibration Date: 8/21/21

Calibration Report ☒ Plate Inspection ☒ Witness ☐ No Flow Test ☐ New Install ☐ Repair / Upgrade ☐

Section 1 - Meter

Station ID	1323			Field	Marathon Road		
Location	North Lea 3 Federal 1H Flare			Area	Marathon Road		
Unit	NA	Township	20S	Producer	Read&Stevens		
Section	15	Range	34E	Purchaser	DCP	Contract Hr.	00
Lease #	N/A	A.P.I.	N/A	County	Lea	State	NM
GPS Cord N	32.609083		W	FMP / RRC #	N/A		
Allocation	<input type="checkbox"/>	Test	<input type="checkbox"/>	Check	<input type="checkbox"/>	Buy Back / Deduct	<input type="checkbox"/>
Monthly	<input type="checkbox"/>	Quarterly	<input type="checkbox"/>	Semi-Annual	<input type="checkbox"/>	Annual	<input checked="" type="checkbox"/>
				Lift Gas	<input type="checkbox"/>	VRU	<input type="checkbox"/>
				Flare	<input checked="" type="checkbox"/>	Other	<input type="checkbox"/>

Section 2 - Configuration

Current Plate Size	2.125	Tap Type	Flange	Recorder Make/Model	Uflo G4	
Previous Plate Size	2.125	SP Tap Loc.	Up Stream	Recorder Serial #	T191865325	
Yest. Volume	156	Atmos. Press.	12.79	Tube Type / Flow Cond.	Simplex	CPA 50E
Specific Gravity	0.803	Press. Base	14.73	Meter Tube I.D. / Beta	3.068	0.692633638
Temperature Base	60	Elev. (in ft.)	3500	Tube Make / Serial #	Precision	1906809

Section 3 - Plate Inspection

Section 4 - Pressure / Leak Test

Yes		No		Yes		No		Yes		No	
Plate Inspected?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Nicked?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Leak Test Performed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Edges Sharp?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Warped?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Leaks Found?	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Seal Ring Damaged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pitted?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Leaks Repaired?	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Dirty?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plate Mic'd?	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
Bevel Downstream?	<input checked="" type="checkbox"/>	<input type="checkbox"/>									

Section 3 - Calibration Data

DIFFERENTIAL in H2O				STATIC PRESSURE IN PSIA				TEMPERATURE			
FOUND		LEFT		FOUND		LEFT		FOUND		LEFT	
Test	Meter	Test	Meter	Test	Meter	Test	Meter	Test	Meter	Test	Meter
0.00	0.07	0.00	0.07	12.79	12.70	12.79	12.70	70.50	70.33	70.50	70.33
125.00	125.06	125.00	125.06	137.79	137.72	137.79	137.72				
250.00	250.04	250.00	250.04	262.79	262.70	262.79	262.70				
175.00	175.02	175.00	175.02	32.79	32.67	32.79	32.67				
50.00	50.05	50.00	50.05								
0.00	0.03	0.00	0.03								

DP check with pressure on SP in PSIA				CALIBRATION RANGE			GAS SAMPLE			
FOUND		LEFT		SPAN						
DP	SP	DP	SP	DP	SP	Temp.				
0.06	12.70	0.08	12.70	250	100	150	Gas Sample Taken?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
0.04	12.70	0.05	12.70	Upper Range Limits			H2S Analysis Taken?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
0.04	12.65	0.06	12.70	400	1500	200	PPM or %	N/A		
							Cylinder #	N/A		

Remarks:

No corrections needed.

Signature / Company		Date
Calibrated by	Nathan Payne	3/10/2022
Witness		



Calibration Equipment

All meters are calibrated utilizing the following equipment.

Calibration certificates are available upon request.

- Crystal IS-33 Dual Pressure Gauge, 32PSI x 3000 PSI
 - Serial Number
 - 2262-821602
 - Calibration Expiration
 - 07/02/2022
 - Crystal XP2i Single Pressure Gauge 3000 PSI
 - Serial Number
 - 262614
 - Calibration Expiration
 - 8/28/2020
 - Saltronix RTD Simulator
 - Serial Number
 - 0619-555
 - Calibration Expiration
 - 8/28/2020
 - Traceable Model 4247 Barometer
 - Serial Number
 - 192051492
 - Calibration Expiration
 - 8/28/2020
 - Starrett Model 799 8" Digital Caliper
 - Serial Number
 - 18/200056
 - Calibration Expiration
 - 8/28/2020
 - Cooper TM99A Thermometer
 - Serial Number
 - 21319021
 - Calibration Expiration
 - 8/28/2020
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With regards,

SPL Measurement Team, NM Division

Please contact us at: 575-746-3481

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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

DEFINITIONS

Action 140454

DEFINITIONS

Operator: READ & STEVENS INC P.O. Box 1518 Roswell, NM 88202	OGRID: 18917
	Action Number: 140454
	Action Type: [C-129] Venting and/or Flaring (C-129)

DEFINITIONS

For the sake of brevity and completeness, please allow for the following in all groups of questions and for the rest of this application:

- this application's operator, hereinafter "this operator";
- venting and/or flaring, hereinafter "vent or flare";
- any notification or report(s) of the C-129 form family, hereinafter "any C-129 forms";
- the statements in (and/or attached to) this, hereinafter "the statements in this";
- and the past tense will be used in lieu of mixed past/present tense questions and statements.

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QUESTIONS

Action 140454

QUESTIONS

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	Action Number: 140454
	Action Type: [C-129] Venting and/or Flaring (C-129)

QUESTIONS

Prerequisites	
<i>Any messages presented in this section, will prevent submission of this application. Please resolve these issues before continuing with the rest of the questions.</i>	
Incident Well	[30-025-42080] NORTH LEA 3 FEDERAL COM #001H
Incident Facility	Not answered.

Determination of Reporting Requirements	
<i>Answer all questions that apply. The Reason(s) statements are calculated based on your answers and may provide additional guidance.</i>	
Was this vent or flare caused by an emergency or malfunction	Yes
Did this vent or flare last eight hours or more cumulatively within any 24-hour period from a single event	Yes
Is this considered a submission for a vent or flare event	Yes, minor venting and/or flaring of natural gas.
<i>An operator shall file a form C-141 instead of a form C-129 for a release that, includes liquid during venting and/or flaring that is or may be a major or minor release under 19.15.29.7 NMAC.</i>	
Was there at least 50 MCF of natural gas vented and/or flared during this event	Yes
Did this vent or flare result in the release of ANY liquids (not fully and/or completely flared) that reached (or has a chance of reaching) the ground, a surface, a watercourse, or otherwise, with reasonable probability, endanger public health, the environment or fresh water	No
Was the vent or flare within an incorporated municipal boundary or withing 300 feet from an occupied permanent residence, school, hospital, institution or church in existence	No

Equipment Involved	
Primary Equipment Involved	Producing Well
Additional details for Equipment Involved. Please specify	No other equipment was involved

Representative Compositional Analysis of Vented or Flared Natural Gas	
<i>Please provide the mole percent for the percentage questions in this group.</i>	
Methane (CH4) percentage	69
Nitrogen (N2) percentage, if greater than one percent	4
Hydrogen Sulfide (H2S) PPM, rounded up	0
Carbon Dioxide (CO2) percentage, if greater than one percent	0
Oxygen (O2) percentage, if greater than one percent	0
<i>If you are venting and/or flaring because of Pipeline Specification, please provide the required specifications for each gas.</i>	
Methane (CH4) percentage quality requirement	Not answered.
Nitrogen (N2) percentage quality requirement	Not answered.
Hydrogen Sulfide (H2S) PPM quality requirement	Not answered.
Carbon Dioxide (CO2) percentage quality requirement	Not answered.
Oxygen (O2) percentage quality requirement	Not answered.

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QUESTIONS, Page 2

Action 140454

QUESTIONS (continued)

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	Action Number: 140454
	Action Type: [C-129] Venting and/or Flaring (C-129)

QUESTIONS

Date(s) and Time(s)	
Date vent or flare was discovered or commenced	02/01/2022
Time vent or flare was discovered or commenced	07:00 AM
Time vent or flare was terminated	12:00 PM
Cumulative hours during this event	24

Measured or Estimated Volume of Vented or Flared Natural Gas	
Natural Gas Vented (Mcf) Details	Not answered.
Natural Gas Flared (Mcf) Details	Cause: Equipment Failure Producing Well Natural Gas Flared Released: 100 Mcf Recovered: 0 Mcf Lost: 100 Mcf
Other Released Details	Not answered.
Additional details for Measured or Estimated Volume(s). Please specify	No other volumes
Is this a gas only submission (i.e. only significant Mcf values reported)	Yes, according to supplied volumes this appears to be a "gas only" report.

Venting or Flaring Resulting from Downstream Activity	
Was this vent or flare a result of downstream activity	No
Was notification of downstream activity received by this operator	No
Downstream OGRID that should have notified this operator	Not answered.
Date notified of downstream activity requiring this vent or flare	Not answered.
Time notified of downstream activity requiring this vent or flare	Not answered.

Steps and Actions to Prevent Waste	
For this event, this operator could not have reasonably anticipated the current event and it was beyond this operator's control.	True
Please explain reason for why this event was beyond this operator's control	There wasn't enough fuel to feed compressor
Steps taken to limit the duration and magnitude of vent or flare	Supply compressor with fuel to start up
Corrective actions taken to eliminate the cause and reoccurrence of vent or flare	Hold back pressure on sales line.

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ACKNOWLEDGMENTS

Action 140454

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ACKNOWLEDGMENTS

<input checked="" type="checkbox"/>	I acknowledge that I am authorized to submit a <i>Venting and/or Flaring</i> (C-129) report on behalf of this operator and understand that this report can be a complete C-129 submission per 19.15.27.8 and 19.15.28.8 NMAC.
<input checked="" type="checkbox"/>	I acknowledge that upon submitting this application, I will be creating a new incident file (assigned to this operator) to track any C-129 forms, pursuant to 19.15.27.7 and 19.15.28.8 NMAC and understand that this submission meets the notification requirements of Paragraph (1) of Subsection G and F respectively.
<input checked="" type="checkbox"/>	I hereby certify the statements in this report are true and correct to the best of my knowledge and acknowledge that any false statement may be subject to civil and criminal penalties under the Oil and Gas Act.
<input checked="" type="checkbox"/>	I acknowledge that the acceptance of any C-129 forms by the OCD does not relieve this operator of liability should their operations have failed to adequately investigate, report, and remediate contamination that poses a threat to groundwater, surface water, human health, or the environment.
<input checked="" type="checkbox"/>	I acknowledge that OCD acceptance of any C-129 forms does not relieve this operator of responsibility for compliance with any other applicable federal, state, or local laws and/or regulations.

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CONDITIONS

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CONDITIONS

Created By	Condition	Condition Date
kbarajas	If the information provided in this report requires an amendment, submit a [C-129] Amend Venting and/or Flaring Incident (C-129A), utilizing your incident number from this event.	9/2/2022