# **DEVON ENERGY**Thistle Unit 22 CTB 2 Unit 185H

### Workplan

UL A, Section 22, T23S, R33E Lea County, New Mexico

NAPP2519126637

July 14, 2025



Prepared for:

Devon Energy 6488 Seven Rivers Hwy Artesia, NM 88210

By:

Safety & Environmental Solutions, Inc. 1501 Hobbs, New Mexico 88240 (575) 397-0510

#### **Company Contacts**

| Representative    | Company      | Telephone    | E-mail                  |
|-------------------|--------------|--------------|-------------------------|
| Jim Raley         | Devon Energy | 575-689-7597 | jim.raley@dvn.com       |
| Leslie Mendenhall | SESI         | 575-397-0510 | Imendenhall@sesi-nm.com |

#### Location

The Thistle Unit 22 CTB 2 Unit 185H is located approximately 57 miles southwest of Hobbs, NM. The legal location for this facility is Unit Letter A, Section 22, Township 23 South and Range 33 East in Lea County, New Mexico. More specifically the latitude and longitude are 32.295136,-103.554495 NAD83.

#### **Background**

Incident C-141 received on 07/16/2025 for release on 07/09/2025. The cause of the release was reported as equipment failure: "Leak on 3-phase separator dump spool allowed fluids to be released to separator skid, approx 7 bbls recovered, 1 bbl impacted pad surface by leaking from skid." approximately Produced Water | Released: 8 BBL | Recovered: 7 BBL | Lost: 1 BBL.

#### **Surface and Groundwater**

According to the United States Department of Agriculture Natural Resources Conservation Service, the soil in this area is classified as Pyote and Maljamar fine sands, with 0 to 3 percent slopes. These soils are derived from sandy eolian deposits formed on plains and rises. The Pyote series consists of fine sand to fine sandy loam with no restrictive features to a depth of over 80 inches and is classified as well drained with negligible runoff. The Maljamar series includes a petrocalcic horizon at 40–60 inches and also drains well with very low runoff potential. Both soils exhibit low available water supply and are rated as non-hydric. The area lies within Ecological Site R070BD003NM (Loamy Sand). This location is not classified as prime farmland and has a high permeability with limited salinity, low gypsum content, and minimal risk of flooding or ponding.

According to the New Mexico Oil Conservation Division (NMOCD) Oil and Gas Map, there are no surface water features within 3,000 feet of the reported release location. Records from the New Mexico Office of the State Engineer (OSE) indicate that the closest registered Point of Diversion (POD), identified as C-04664-POD1, is located approximately 0.38 miles northwest of the release site at coordinates 32.30251, -103.37444 (SE NW SE, Section 15, Township 23 South, Range 33 East). This well was drilled by Devon Energy on September 7, 2022, to a depth of 55 feet below ground surface (bgs) using a hollow stem auger. No groundwater was encountered during drilling, and the well was classified as a dry hole.

#### Characterization

|                                                                                                                       | Table I                       |                                  |              |
|-----------------------------------------------------------------------------------------------------------------------|-------------------------------|----------------------------------|--------------|
| CI                                                                                                                    | osure Criteria for Soils Impa | cted by a Release                |              |
| Minimum depth below any point within the horizontal boundary of the release to ground water less than 10,000 mg/l TDS | Constituent                   | Method*                          | Limit**      |
| ≤ 50 feet                                                                                                             | Chloride***                   | EPA 300.0 or SM4500 CI B         | 600 mg/kg    |
| _                                                                                                                     | TPH                           | EPA SW-846                       | 100 mg/kg    |
|                                                                                                                       | (GRO+DRO+MRO)                 | Method 8015M                     |              |
|                                                                                                                       | BTEX                          | EPA SW-846 Method 8021B or 8260B | 50 mg/kg     |
|                                                                                                                       | Benzene                       | EPA SW-846 Method 8021B or 8260B | 10 mg/kg     |
| 51 feet-100 feet                                                                                                      | Chloride***                   | EPA 300.0 or SM4500 CI B         | 10,000 mg/kg |
|                                                                                                                       | TPH                           | EPA SW-846 Method 8015M          | 2,500 mg/kg  |
|                                                                                                                       | (GRO+DRO+MRO)                 |                                  |              |

| CI                                                                                                                    | Table I osure Criteria for Soils Impa | cted by a Release                |              |
|-----------------------------------------------------------------------------------------------------------------------|---------------------------------------|----------------------------------|--------------|
| Minimum depth below any point within the horizontal boundary of the release to ground water less than 10,000 mg/l TDS | Constituent                           | Method*                          | Limit**      |
|                                                                                                                       | GRO+DRO                               | EPA SW-846 Method 8015M          | 1,000 mg/kg  |
|                                                                                                                       | BTEX                                  | EPA SW-846 Method 8021B or 8260B | 50 mg/kg     |
|                                                                                                                       | Benzene                               | EPA SW-846 Method 8021B or 8260B | 10 mg/kg     |
| >100 feet                                                                                                             | Chloride***                           | EPA 300.0 or SM4500 CI B         | 20,000 mg/kg |
|                                                                                                                       | TPH                                   | EPA SW-846 Method 8015M          | 2,500 mg/kg  |
|                                                                                                                       | (GRO+DRO+MRO)                         |                                  |              |
|                                                                                                                       | GRO+DRO                               | EPA SW-846 Method 8015M          | 1,000 mg/kg  |
|                                                                                                                       | BTEX                                  | EPA SW-846 Method 8021B or 8260B | 50 mg/kg     |
|                                                                                                                       | Benzene                               | EPA SW-846 Method 8021B or 8260B | 10 mg/kg     |

<sup>\*</sup>Or other test methods approved by the division.

[19.15.29.12 NMAC - N, 8/14/2018]

#### **WORK PERFORMED**

On July 14, 2025, SESI mobilized the site to conduct a delineation investigation. A total of seventeen (17) soil samples were collected at the surface and at six inches bgs. Samples were field-tested for chloride and submitted to Cardinal Laboratories (Lab ID: H254241) under proper chain-of-custody protocols for full analysis of:

- Chloride (SM4500Cl-B)
- DRO/GRO/EXT DRO (EPA 8015M)
- BTEX (EPA 8021B)

|            | Devon Energy Thistle Unit 22 CTB 2 Unit 185H Sample Date Collected 07/14/2025 Cardinal Laboratory: H254241 |                    |                    |                             |                          |                          |                |                |                |  |  |  |
|------------|------------------------------------------------------------------------------------------------------------|--------------------|--------------------|-----------------------------|--------------------------|--------------------------|----------------|----------------|----------------|--|--|--|
| Sample ID  | Chloride<br>(mg/Kg)                                                                                        | Benzene<br>(mg/Kg) | Toluene<br>(mg/Kg) | Ethyl<br>benzene<br>(mg/Kg) | Total Xylenes<br>(mg/Kg) | Total<br>BTEX<br>(mg/Kg) | MRO<br>(mg/Kg) | GRO<br>(mg/Kg) | DRO<br>(mg/Kg) |  |  |  |
| AH-1 @ 6"  | 8000                                                                                                       | <0.050             | <0.050             | <0.050                      | <0.150                   | <0.300                   | <10.0          | <10.0          | <10.0          |  |  |  |
| AH-2 @ 6"  | 10400                                                                                                      | <0.050             | <0.050             | <0.050                      | <0.150                   | <0.300                   | <10.0          | <10.0          | <10.0          |  |  |  |
| AH-3 @ 6"  | 448                                                                                                        | <0.050             | <0.050             | <0.050                      | <0.150                   | <0.300                   | <10.0          | <10.0          | <10.0          |  |  |  |
| AH-4 @ 6"  | 9730                                                                                                       | <0.050             | <0.050             | <0.050                      | <0.150                   | <0.300                   | <10.0          | <10.0          | <10.0          |  |  |  |
| AH-5 @ 6"  | 10900                                                                                                      | <0.050             | <0.050             | <0.050                      | <0.150                   | <0.300                   | <10.0          | <10.0          | <10.0          |  |  |  |
| AH-6 @ 6"  | 7460                                                                                                       | <0.050             | <0.050             | <0.050                      | <0.150                   | <0.300                   | <10.0          | <10.0          | <10.0          |  |  |  |
| AH-7 @ 6"  | 11300                                                                                                      | <0.050             | <0.050             | <0.050                      | <0.150                   | <0.300                   | <10.0          | <10.0          | <10.0          |  |  |  |
| AH-8 @ 6"  | 9330                                                                                                       | <0.050             | <0.050             | <0.050                      | <0.150                   | <0.300                   | <10.0          | <10.0          | <10.0          |  |  |  |
| AH-9 @ 6"  | 11100                                                                                                      | <0.050             | <0.050             | <0.050                      | <0.150                   | <0.300                   | <10.0          | <10.0          | <10.0          |  |  |  |
| AH-10 @ 6" | 80                                                                                                         | <0.050             | <0.050             | <0.050                      | <0.150                   | <0.300                   | <10.0          | <10.0          | <10.0          |  |  |  |
| AH-11 @ 6" | 7060                                                                                                       | <0.050             | <0.050             | <0.050                      | <0.150                   | <0.300                   | <10.0          | <10.0          | <10.0          |  |  |  |
| AH-12 @ 6" | 2920                                                                                                       | <0.050             | <0.050             | <0.050                      | <0.150                   | <0.300                   | <10.0          | <10.0          | <10.0          |  |  |  |
| HP-1       | 96                                                                                                         | <0.050             | <0.050             | <0.050                      | <0.150                   | <0.300                   | <10.0          | <10.0          | <10.0          |  |  |  |
| HP-2       | 112                                                                                                        | <0.050             | <0.050             | <0.050                      | <0.150                   | <0.300                   | <10.0          | <10.0          | <10.0          |  |  |  |
| HP-3       | 64                                                                                                         | <0.050             | <0.050             | <0.050                      | <0.150                   | <0.300                   | <10.0          | <10.0          | <10.0          |  |  |  |
| HP-4       | 80                                                                                                         | <0.050             | <0.050             | <0.050                      | <0.150                   | <0.300                   | <10.0          | <10.0          | <10.0          |  |  |  |
| HP-5       | 208                                                                                                        | <0.050             | <0.050             | <0.050                      | <0.150                   | <0.300                   | <10.0          | <10.0          | <10.0          |  |  |  |

<sup>\*\*</sup>Numerical limits or natural background level, whichever is greater.

<sup>\*\*\*</sup>This applies to releases of produced water or other fluids, which may contain chloride.

#### **Proposed Remediation Action Plan**

Following the delineation investigation conducted on July 14, 2025, SESI determined that the release impacted an area of approximately 3,923 square feet. The site is located in an area with low karst potential, and groundwater is present at a depth greater than 55 feet below ground surface (bgs). Based on these conditions, the applicable remediation standards under NMOCD Table 1 are 10,000 mg/kg for chloride and 2,500 mg/kg for total petroleum hydrocarbons (TPH). Laboratory analytical results indicate that several soil samples, including AH-2, AH-5, AH-7, and AH-9, contained chloride concentrations exceeding 10,000 mg/kg, while all BTEX and hydrocarbon fractions (DRO, GRO, and MRO) were reported below laboratory detection limits.

To address the impacted soils, SESI proposes to conduct excavation using backhoe equipment where accessible, or by hand digging in areas with limited access or near sensitive infrastructure. Excavation will be performed to a depth of approximately one to two feet bgs, or deeper if required, until confirmation samples indicate that vertical delineation meets the applicable closure criteria. All excavated material will be transported under manifest to an NMOCD-approved disposal facility. Due to the presence of existing infrastructure, excavation in certain portions of the affected area is not currently feasible. For these areas, SESI is requesting a deferral of remediation until final pad reclamation is performed at the time of facility abandonment.

Upon completion of excavation activities, confirmation soil samples will be collected from the base and sidewalls of the excavation. These samples will be submitted to Envirotech Laboratories for analysis in accordance with NMOCD-approved methods and Table 1 standards. Once laboratory results confirm that the regulatory closure criteria have been met, the excavated areas will be backfilled with clean, compatible material and restored to the surrounding grade.

A final remediation closure report will be prepared and submitted to the NMOCD for review and approval. This report will include analytical results, photographs, and details of site restoration activities for regulatory review and approval.

#### **Supplemental Documentation**

Document 1: Vicinity Map

Document 2: OSE information

Document 3: NMOCD Oil and Gas Map

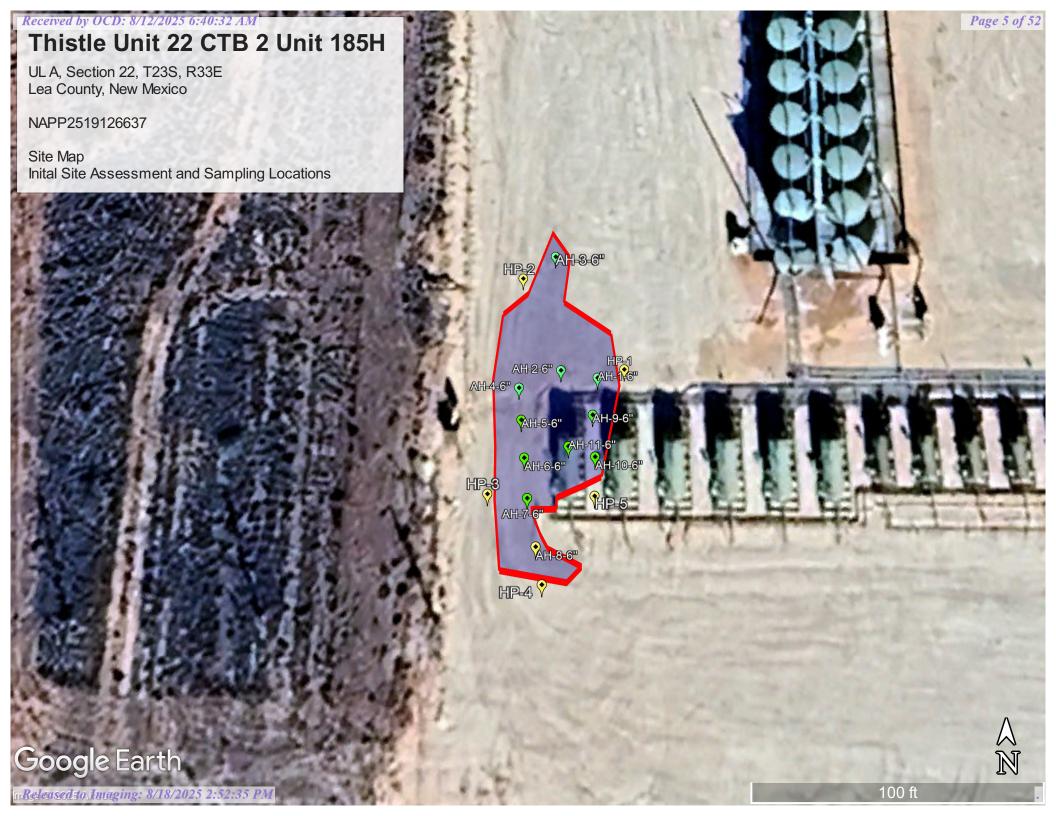
Document 4: BLM Cave Karst Map

Document 5: FEMA Floodplain Map

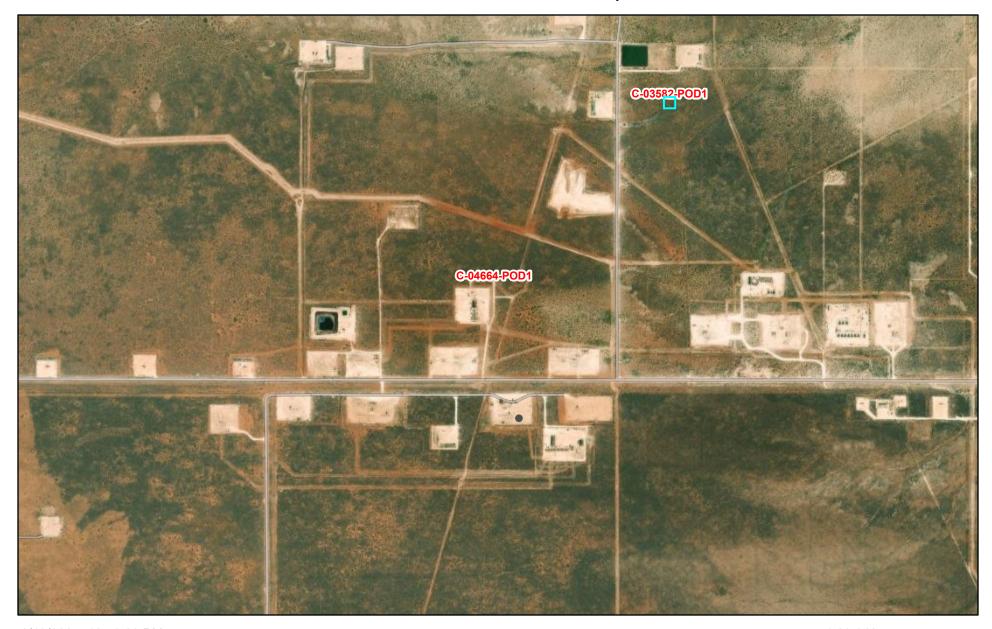
Document 6: Photographs

Document 7: Laboratory Analytical Report

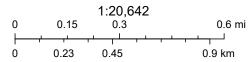
Document 8: C-141 initial



### **OSE POD Location Map**



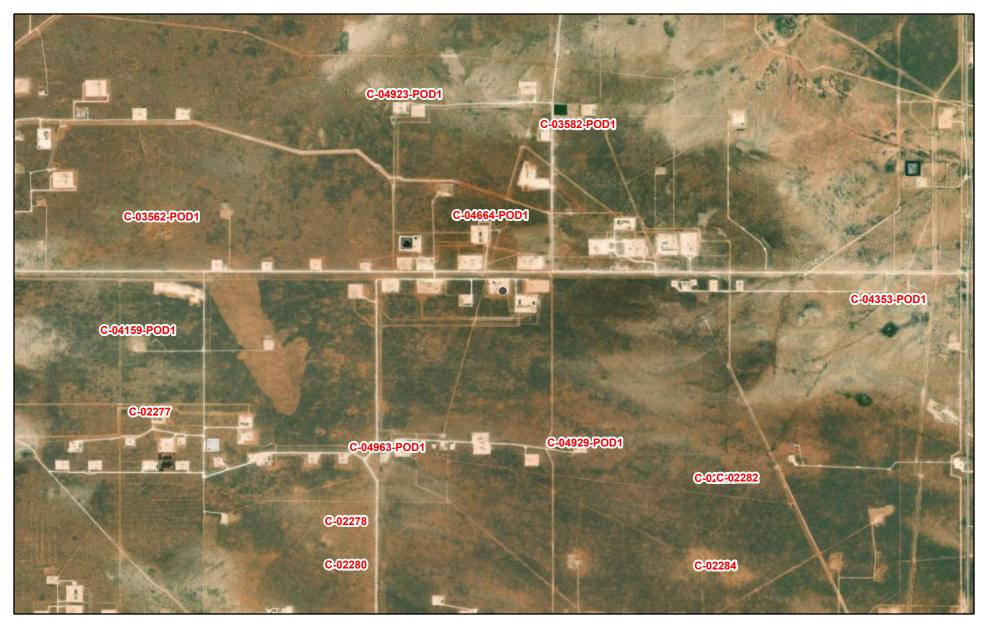
6/19/2025, 12:53:20 PM



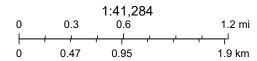
Sources: Esri, TomTom, Garmin, FAO, NOAA, USGS, (c) OpenStreetMap contributors, and the GIS User Community, Maxar

Online web use

### **OSE POD Location Map**



6/19/2025, 12:59:44 PM



Sources: Esri, TomTom, Garmin, FAO, NOAA, USGS, (c) OpenStreetMap contributors, and the GIS User Community, Maxar

Online web use

This is an unofficial map from the OSE's online application.



### WELL RECORD & LOG

#### OFFICE OF THE STATE ENGINEER

www.ose.state.nm.us

STATE ENGINEER OFFICE ROSVIII

OSE FILE NUMBER(S) POD NUMBER (WELL NUMBER) R. GENERAL AND WELL LOCATION 882leC DEGREES MINUTES SECONDS WELL ACCURACY REQUIRED: ONE TENTH OF A SECOND 34. 2. /୪ LOCATION LATITUDE \* DATUM REQUIRED: WGS 84 (FROM GPS) w LONGITUDE DESCRIPTION RELATING WELL LOCATION TO STREET ADDRESS AND COMMON LANDMARKS (160 ACRE) SECTION TOWNSHIP RANGE (10 ACRE) (40 ACRE) (2.5 ACRE) NORTH ☐ EAST 2 OPTIONAL 1/4 1/4 1/4 1/4 SOUTH WEST LOT NUMBER BLOCK NUMBER UNIT/TRACT SUBDIVISION NAME HYDROGRAPHIC SURVEY MAP NUMBER TRACT NUMBER NAME OF LICENSED DRILLER NAME OF WELL DRILLING COMPANY LICENSE NUMBER WD1682 HUNGIN HOYS LI 2MOLY DEPTH OF COMPLETED WELL (FT) BORE HOLE DEPTH (FT) DRILLING STARTED DRILLING ENDED 90 0-18-12 STATIC WATER LEVEL IN COMPLETED WELL (FT) SHALLOW (UNCONFINED) COMPLETED WELL IS: \_\_\_ ARTESIAN DRY HOLE □ AIR MUD. ADDITIVES - SPECIFY: DRILLING FLUID: ROTARY ☐ HAMMER OTHER – SPECIFY: CABLE TOOL DRILLING METHOD: DEPTH (FT) BORE HOLE **CASING** CONNECTION INSIDE DIA. CASING WALL SLOT THICKNESS (IN) TYPE (CASING) SIZE (IN) CASING (IN) DIA. (IN) MATERIAL FROM TO 12" 78 DEPTH (FT) FORMATION DESCRIPTION OF PRINCIPAL WATER-BEARING STRATA THICKNESS YIELD 4:WATER BEARING STRATA (FT) (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES) (GPM) FROM 0 METHOD USED TO ESTIMATE YIELD OF WATER-BEARING STRATA TOTAL ESTIMATED WELL YIELD (GPM) FOR OSE INTERNAL USE WELL RECORD & LOG (Version 6/9/08) POD NUMBER TRN NUMBER 51576 **FILE NUMBER** LOCATION PAGE 1 OF 2

| · ·                 |                         |                                                  | ······································ |                                                                     |                |                      |                         |                                       |
|---------------------|-------------------------|--------------------------------------------------|----------------------------------------|---------------------------------------------------------------------|----------------|----------------------|-------------------------|---------------------------------------|
| JMP                 | TYPE OF PUMP:           | ☐ SUBMERSIBLE ☐ TURBINE                          | ☐ JET<br>☐ CYLINDER                    | ☐ NO PUMP – WELL NO ☐ OTHER – SPECIFY:                              | OT EQUIPPED    | un                   |                         |                                       |
| STSEAL AND PUMP.    | ANNULAR                 | DEPTH (FT) FROM TO                               | BORE HOLE<br>DIA. (IN)                 | MATERIAL TYPE AND                                                   | ) SIZE         | AMOUNT<br>(CUBIC FT) | METHO<br>PLACE          |                                       |
| SEAL                | SEAL AND<br>GRAVEL PACK | 0 20                                             | 12-                                    | quit /cene                                                          | at             | 8                    | 10                      | P                                     |
| 5.                  |                         | <del>                                     </del> |                                        | . <u>.</u>                                                          |                |                      |                         |                                       |
|                     | DEPTH (FT) FROM TO      | THICKNESS<br>(FT)                                |                                        | COLOR AND TYPE OF MATERI<br>IDE WATER-BEARING CAVITI                |                |                      | WA <sup>*</sup><br>BEAR |                                       |
|                     | 0 7                     | 7                                                |                                        | tnosoil.                                                            |                | <u> </u>             | ☐ YES                   | DX NO                                 |
| - (a)               | 7 18                    |                                                  |                                        | calicle                                                             |                |                      | ☐ YES                   | DYNO                                  |
| , i                 | 18 65                   | 41                                               |                                        | Sand                                                                |                |                      | <b>□</b> YES            | □ NO                                  |
| 1                   | 65 80                   | 15                                               |                                        | ROCK                                                                |                |                      | ☐ YES                   | ĎĮνο                                  |
| 100                 | 80 95                   | 15                                               |                                        | Redday                                                              | ···-           |                      | YES                     | ON D                                  |
| GEOLOGIC ROGIOFWELL | 95 110                  | (5)                                              |                                        | <u>Sand</u>                                                         |                |                      | YES                     | Ои                                    |
| 0,01                | 110 230                 | 120                                              |                                        | Red day                                                             |                |                      | YES                     | □ио                                   |
| ļ Ņ                 | 230 236                 | 6                                                |                                        | Sand                                                                | <del>.</del>   |                      | YES                     | ON 🗆                                  |
| Cic.                | 236 310                 | 74                                               | <u></u>                                | Red clay                                                            |                |                      | ĬŽÍ YES                 | <b>□</b> NO                           |
| Office              | 310 302                 | 22                                               |                                        | Sandclai                                                            | <del>}</del>   |                      | YES                     | □ NO                                  |
| Ö                   | 302 383                 | <u> </u>                                         |                                        | rea day                                                             | <del></del>    |                      | ☑ YES                   | ON D                                  |
|                     | 383 371                 | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \            | ·                                      | Sand                                                                | <u> </u>       |                      | YES YES                 | Ои                                    |
|                     | 391 910                 | <del> </del>                                     |                                        | raa aaa                                                             | <del>1</del> _ |                      | Y YES                   | □ NO                                  |
|                     | 910 416                 | 6                                                | <u> </u>                               | Sand                                                                |                | <u></u>              | YES                     | □ NO                                  |
| , ,                 | 4/0 5/3                 | 7.1                                              |                                        | raadai                                                              | <del>}</del> - |                      | VES YES                 | □ NO                                  |
| S. s.               | 577 570<br>570 590      | 109                                              |                                        | Sand                                                                |                | <u> </u>             | Ø YES<br>Ø YES          | □ NO                                  |
| 5 3                 | 300 370                 | ATTACH ADDITION                                  | AL PACES AS NE                         | EDED TO FULLY DESCRIBE TH                                           | HR GEOLOGIC I  | OC OF THE WELL       | LI TES                  | LI NO                                 |
|                     |                         |                                                  |                                        | <del></del>                                                         |                | VI                   |                         |                                       |
| INFO                | WELL TEST               |                                                  | CH A COPY OF D                         | AIR LIFT OTHER - S  ATA COLLECTED DURING WE  ND DRAWDOWN OVER THE T | LL TESTING, IN |                      | ME, END TI              | ME,                                   |
| NAL                 | ADDITIONAL STATES       | MENTS OR EXPLANATIONS:                           | NO DISCHARGE A                         |                                                                     | COTINO ( CRIO  |                      | <del></del>             |                                       |
| L E                 | ADDITIONALSTATE         | ELVIS ON EAT GAVATIONS.                          |                                        |                                                                     |                | 17 NOV 2             | II.                     |                                       |
| O V                 |                         |                                                  |                                        |                                                                     |                | 2                    | NGINE                   | 1                                     |
| T. &                |                         |                                                  |                                        |                                                                     |                | 21                   | 温                       |                                       |
| 7.TEST, & ADDITION  |                         |                                                  |                                        |                                                                     |                | Ď                    | 医足                      |                                       |
| , F.                | ·····                   |                                                  |                                        |                                                                     |                | <u> </u>             | <u> 겨울</u>              |                                       |
| 101                 | THE UNDERSIGNI          | ED HEREBY CERTIFIES TO                           | HAT, TO THE BE                         | ST OF HIS OR HER KNOWLED<br>THAT HE OR SHE WILL FILE                | GE AND BELIEF  | THE FOREGOING I      | S'ATRUE A               | ND<br>ED AND                          |
| LOT                 | THE PERMIT HOL          | DER WITHIN 20 DAYS A                             | FTER COMPLETIC                         | ON OF WELL DRILLING:                                                | THIS WELL KE   | CORD WITH FALCS!     | TE ENGINE               | LKAND                                 |
| Z.                  | 11)                     | In Thuch                                         |                                        | 1L101                                                               | 12             |                      |                         |                                       |
| SSIGNATURE          | -4                      | SIGNATURE OF DRILL                               |                                        | DATE                                                                | 14             |                      |                         |                                       |
|                     |                         | SIGNATURE OF DRIEL                               |                                        | DATE                                                                |                |                      |                         | · · · · · · · · · · · · · · · · · · · |
|                     | $\vee$                  | -                                                |                                        |                                                                     |                | /                    |                         |                                       |
|                     | FOR OSE INTERNA         | AL USE                                           |                                        |                                                                     | WE             | LL RECORD & LOG      | Version 6/9/0           | 8)                                    |
| Ţ                   | FILE NUMBER             | C-3582                                           |                                        | POD NUMBER                                                          | TRI            | NUMBER 516           | W07                     |                                       |
|                     | LOCATION                | STK                                              |                                        | 235.33E.                                                            | 14.114         |                      | PAGE 2 OF               | 2                                     |



### WELL RECORD & LOG

#### OFFICE OF THE STATE ENGINEER

www.ose.state.nm.us

| NO                            |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | )                |              | WELL TAG ID NO<br>n/a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | ),         |           | OSE FILE NO     | (S).                |           |                   |                  |
|-------------------------------|------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|--------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------|-----------------|---------------------|-----------|-------------------|------------------|
| OCATIO                        | WELL OWNER N<br>Devon Energy |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |            |           |                 | 2000                |           |                   |                  |
| VELL L                        |                              | WELL OWNER MAME(S) Devon Energy  WELL OWNER MAILING ADDRESS 6488 7 Rivers Hwy  WELL DEGREES MINUTES SECONDS LOCATION (GROM GPS)  WELL DEGREES MINUTES SECONDS LOCATION (GROM GPS)  LOCATION (GROM GPS)  DESCRIPTION RELATING WELL LOCATION TO STREET ADDRESS AND COMMON LANDMARKS - PLSS (SECTION, TOWNSHIIP, RANGE) WHERE AVAILABLE SE NW SE Sec. 15 T23S R33S NMPM  LICENSE NO. 1249  NAME OF LICENSED DRILLER Jackie D. Atkins  NAME OF WELL DRILLING COMPANY Atkins Engineering Associate PSTATIC WATER LEVEL. NAME OF WELL DRILLING COMPANY Atkins Engineering Associate PSTATIC WATER LEVEL. NAME OF WELL DRILLING COMPANY ATKING TOWNSHIIP, RANGE) WHERE AVAILABLE  SE NW SE Sec. 15 T23S R33S NMPM  LICENSE NO. 1249  NAME OF WELL DRILLING COMPANY Atkins Engineering Associate PSTATIC WATER LEVEL. NAME OF WELL DRILLING COMPANY ATKING TOWNSHIIP, RANGE) WHERE AVAILABLE  NORTH TOWNSHIIP, RANGE) WHERE AVAILABLE  STATIC WATER LEVEL. NORTH TOWNSHIIP, RANGE) WHERE AVAILABLE  STATIC WATER LEVEL. NAME OF WELL DRILLING COMPANY Atkins Engineering Associate NORTH TOWNSHIIP, RANGE) WHERE AVAILABLE  STATIC WATER LEVEL. NORTH TOWNSHIIP, RANGE) WHERE AVAILABLE  COMPLETED WELL IS: ARTESIAN  ORK OF WELL DRILLING COMPANY Atkins Engineering Associate NAME OF WELL DRILLING COMPANY Atkins Engineering Associ |                  |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |            |           |                 |                     |           | 88210             | ZIP              |
| GENERAL AND WELL LOCATION     |                              | LA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                  |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |            | 12        |                 |                     | TH OF A   | A SECOND          |                  |
| ER                            | (FROM GPS)                   | LO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | NGITUDE          | 103          | 22                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 27.        | 99 W      | DATUM RE        | QUIRED: WGS 84      |           |                   |                  |
| 1. GEN                        | The sales were the second    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  | O STREET ADD | RESS AND COMMO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | N LANDM    | ARKS – PL | SS (SECTION, TO | OWNSHJIP, RANGE) WH | ERE AV    | VAILABLE          |                  |
|                               | LICENSE NO.                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | NAME OF LICENSEL | DRILLER      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |            |           |                 | NAME OF WELL DR     | ILLING    | COMPANY           |                  |
|                               | 1249                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  | 1            | Jackie D. Atkin                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | s          |           |                 | Atkins Eng          | ineerir   | ng Associates, In | nc.              |
|                               |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  | DEPTH OF CO  | and the second s | FT)        | BORE HO   |                 | DEPTH WATER FIR:    |           |                   |                  |
| z                             | COMPLETED W                  | ELL IS:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ARTESIAN         | ✓ DRY HOL    | E SHALL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | OW (UNCO   | NFINED)   | IN COM          |                     | /a        | 9/13/2            |                  |
| 1 2                           | DRILLING FLUII               | D:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | ☐ AIR            | ☐ MUD        | ADDITI                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | VES – SPE  | CIFY:     |                 |                     |           |                   |                  |
| MA                            | DRILLING METI                | HOD:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | ROTARY HAM       | MER CABI     | LE TOOL 7 OT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | HER – SPEC | CIFY:     | Hollow Stem     | Auger CHECK         | HERE      | IF PITLESS ADAP   | TER IS           |
| O.                            |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |              | -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |            |           |                 | INSTAL              | LED       |                   |                  |
| Z                             | 7.000.000.000                | -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                  | CASING       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | D/OR       |           |                 |                     | 111100000 |                   | SLOT             |
| DRILLING & CASING INFORMATION | FROM                         | то                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                  |              | each casing string                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |            | 1000000   | TYPE            |                     | Ti        |                   | SIZE<br>(inches) |
| CA                            | 0                            | 55                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                  | note         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ı)         | (add cou  | pling diameter) |                     |           | -                 |                  |
| 8 5                           |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |              | A.M.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |            |           |                 |                     |           |                   |                  |
| l i                           |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |            |           |                 |                     |           |                   |                  |
| II                            |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |            |           |                 | OCCUT OCC           | oc.       | 00000100          |                  |
| 2.1                           |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |            |           |                 | טטב טוו טבו         | 20        | ZUZZ PM3.Z.       | 3                |
|                               |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |            |           |                 |                     |           |                   |                  |
|                               |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |            |           |                 |                     | _         |                   |                  |
|                               |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |            |           |                 |                     | _         |                   |                  |
|                               |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |            |           |                 |                     | -         |                   |                  |
|                               |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |            |           |                 |                     | <u> </u>  |                   |                  |
|                               | DEPTH (fee                   | et bgl)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | BORE HOLE        | LI           | ST ANNULAR S                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | SEAL MA    | TERIAL    | AND             | AMOUNT              |           | METHO             |                  |
| E                             | FROM                         | то                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | DIAM. (inches)   | GRA          | VEL PACK SIZI                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | E-RANGI    | BY INT    | ERVAL           | (cubic feet)        |           | PLACEM            | IENT             |
| LER                           |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |            |           |                 |                     |           |                   |                  |
| MA                            |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |            |           |                 |                     |           |                   |                  |
| AR.                           |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |            |           |                 |                     |           |                   |                  |
| 15                            |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |            |           |                 |                     |           |                   |                  |
| ANNULAR MATERIAL              |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |            |           |                 |                     |           |                   |                  |
| 3.7                           |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |            |           |                 |                     |           |                   |                  |
|                               |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |            |           |                 |                     |           |                   |                  |
| FOR                           | OSE INTERNA                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |            |           | WR-             | 20 WELL RECORD      |           | G (Version 01/2   | 8/2022)          |
| FILI                          | ENO. C-                      | 041                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | e64              |              | POD N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | O.         |           | TRN             | NO. 732 81          | 4         |                   |                  |
| LOC                           | CATION 2                     | 35.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 33E. 1           | 5 4          | 14                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |            |           | WELL TAG        | ID NO.              |           | PAGE              | 1 OF 2           |

|                              | DEPTH (     | feet bgl)      |                                 | COLOR AN                                                      | D TYPE OF MA                 | TERIAL E           | NCOUN     | TERED -                 |                  | WAT                 | ER         | ESTIMATED<br>YIELD FOR           |
|------------------------------|-------------|----------------|---------------------------------|---------------------------------------------------------------|------------------------------|--------------------|-----------|-------------------------|------------------|---------------------|------------|----------------------------------|
|                              | FROM        | то             | THICKNESS<br>(feet)             | INCLUDE WATE                                                  | ER-BEARING CA                |                    |           |                         | s                | BEAR<br>(YES        |            | WATER-<br>BEARING<br>ZONES (gpm) |
|                              | 0           | 24             | 24                              | Sand, Mediun                                                  | n/ fine grained, p           | oorly graded       | l, with c | aliche, Red             |                  | Y                   | ✓ N        |                                  |
|                              | 24          | 29             | 5                               | Ca                                                            | liche, consolidate           | ed, with sand      | d, White  | 8                       |                  | Y                   | ✓ N        |                                  |
|                              | 29          | 34             | 5                               | Sand, Medium                                                  | n/ fine grained, p           | oorly grade        | d, with c | aliche,Red              |                  | Y                   | √ N        |                                  |
|                              | 34          | 55             | 21                              | Sand, M                                                       | edium/ fine grain            | ed, poorly g       | graded, E | Brown                   |                  | Y                   | ✓ N        |                                  |
|                              |             |                |                                 |                                                               |                              |                    |           |                         |                  | Y                   | N          |                                  |
| 1                            |             |                |                                 |                                                               |                              |                    |           |                         |                  | Y                   | N          |                                  |
| 4. HYDROGEOLOGIC LOG OF WELL |             |                |                                 |                                                               |                              |                    |           |                         |                  | Y                   | N          |                                  |
| OF                           |             |                |                                 |                                                               |                              |                    |           |                         |                  | Y                   | N          |                                  |
| 00                           |             |                |                                 |                                                               |                              |                    |           |                         |                  | Y                   | N          |                                  |
| i)                           |             |                |                                 |                                                               |                              |                    |           |                         |                  | Y                   | N          |                                  |
| 007                          |             |                |                                 |                                                               |                              |                    |           |                         |                  | Y                   | N          |                                  |
| GEO                          |             |                |                                 |                                                               |                              |                    |           |                         |                  | Y                   | N          |                                  |
| RO                           |             |                |                                 |                                                               |                              |                    |           |                         |                  | Y                   | N          |                                  |
| HAI                          |             |                |                                 |                                                               |                              |                    |           |                         |                  | Y                   | N          |                                  |
| 4                            |             |                |                                 |                                                               |                              |                    |           |                         |                  | Y                   | N          |                                  |
|                              |             |                |                                 |                                                               |                              |                    |           |                         |                  | Y                   | N          |                                  |
|                              |             |                |                                 |                                                               |                              |                    |           |                         |                  | Y                   | N          |                                  |
|                              |             |                |                                 |                                                               |                              |                    |           |                         |                  | Y                   | N          |                                  |
|                              |             |                |                                 |                                                               |                              |                    |           |                         |                  | Y                   | N          |                                  |
|                              |             |                |                                 |                                                               |                              |                    |           |                         |                  | Y                   | N          |                                  |
|                              |             |                |                                 |                                                               |                              |                    |           |                         |                  | Y                   | N          |                                  |
|                              | METHOD U    | SED TO ES      | STIMATE YIELD                   | OF WATER-BEARING                                              | G STRATA:                    |                    |           |                         |                  | AL ESTIN            |            | VACCOUNTY                        |
|                              | PUM         | P \Bar         | IR LIFT                         | BAILER                                                        | THER - SPECIF                | Y:                 |           |                         | WEL              | L YIELD             | (gpm):     | 0.00                             |
| VISION                       | WELL TES    | T TEST<br>STAR | RESULTS - ATT<br>T TIME, END TI | TACH A COPY OF DAT<br>IME, AND A TABLE SH                     | TA COLLECTED<br>HOWING DISCH | DURING<br>HARGE AN | WELL T    | ESTING, INC<br>WDOWN OV | CLUDII<br>ER THI | NG DISC<br>E TESTIN | HARGE I    | METHOD,<br>DD.                   |
| VISI                         | MISCELLA    | NEOUS IN       | FORMATION: T                    | emporary well materia                                         | al removed and               | soil horing        | g backf   | illed using di          | ill cutt         | ings from           | n total de | enth to ten feet                 |
| TEST; RIG SUPER              |             |                | be                              | elow ground surface(b                                         | gs), then hydra              | ted benton         | ite chip  | s ten feet bg           | s to su          | rface.              |            |                                  |
| G ST                         |             |                |                                 |                                                               |                              |                    |           | 09                      | SE DI            | I SEP 2             | 26 202     | 2 PM3:25                         |
| , R                          |             |                |                                 |                                                               |                              |                    |           |                         |                  |                     |            |                                  |
| LEST                         | PRINT NAM   | ME(S) OF D     | RILL RIG SUPE                   | RVISOR(S) THAT PRO                                            | VIDED ONSITE                 | SUPERVI            | SION O    | F WELL CON              | STRU             | CTION O             | THER TH    | IAN LICENSEE:                    |
| .5.                          | Shane Eldri | dge, Came      | eron Pruitt                     | With                                                          |                              |                    |           |                         |                  |                     |            |                                  |
| TURE                         | CORRECT     | RECORD O       | F THE ABOVE I                   | FIES THAT, TO THE B<br>DESCRIBED HOLE AN<br>30 DAYS AFTER COM | ID THAT HE OI                | R SHE WIL          | L FILE    | GE AND BEI<br>THIS WELL | IEF, T           | HE FORE             | GOING I    | IS A TRUE AND<br>ATE ENGINEER    |
| SIGNATURE                    | Jack 1      | Atkins         |                                 | Ja                                                            | ckie D. Atkins               |                    |           |                         |                  | 9/16                | /2022      |                                  |
| .9                           |             | SIGNAT         | URE OF DRILLE                   | ER / PRINT SIGNEE                                             | NAME                         |                    |           | -                       |                  |                     | DATE       |                                  |
| FO                           | R OSE INTER | NAL LISE       |                                 |                                                               |                              |                    |           | WR-20 WF                | LL RF            | CORD &              | LOG (Ve    | rsion 01/28/2022)                |
|                              |             | 6461           | 04                              |                                                               | POD NO.                      |                    |           |                         |                  | 814                 | 200 (10    | virzorzozz)                      |
| LO                           | CATION 2    | 135.           | 33€. 1                          | 5 414                                                         |                              |                    | WELL      | TAG ID NO.              |                  |                     |            | PAGE 2 OF 2                      |

Mike A. Hamman, P.E. State Engineer



Roswell Office 1900 WEST SECOND STREET ROSWELL, NM 88201

#### STATE OF NEW MEXICO OFFICE OF THE STATE ENGINEER

Trn Nbr:

732814

File Nbr:

C 04664 Well File Nbr: C 04664 POD1

Oct. 03, 2022

DALE WOODALL DEVON ENERGY 6488 7 RIVERS HWY ARTESIA, NM 88210

#### Greetings:

The above numbered permit was issued in your name on 08/25/2022.

The Well Record was received in this office on 09/26/2022, stating that it had been completed on 09/07/2022, and was a dry well. The well is to be plugged according to 19.27.4.30 NMAC.

Please note that another well can be drilled under this permit if the well is completed and the well log filed on or before 08/25/2023.

If you have any questions, please feel free to contact us.

Clemuna

Sincerely,

Vanessa Clements (575) 622-6521

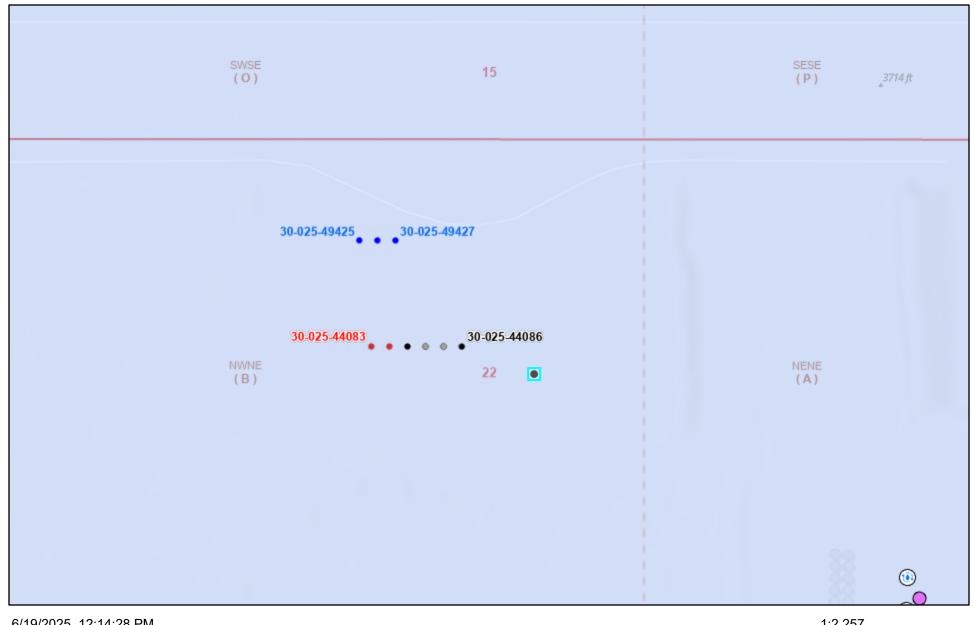
drywell

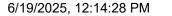


| Z                             | OSE POD NO. POD 1 (TW    |            | 0.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                | WELL TAG ID NO.                                                      |                  |            | OSE FILE NO              | S).                                     |                          |                    |                          |
|-------------------------------|--------------------------|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|----------------------------------------------------------------------|------------------|------------|--------------------------|-----------------------------------------|--------------------------|--------------------|--------------------------|
| CATIO                         | WELL OWNER               | R NAME(S   | PATE AND ADDRESS OF THE PATE A | D.             | IVA .                                                                |                  |            | PHONE (OPTI              | ONAL)                                   |                          |                    |                          |
| GENERAL AND WELL LOCATION     | WELL OWNER<br>5315 Buena | MAILING    | G ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | r<br>          |                                                                      |                  |            | CITY                     |                                         | STATE<br>NM              | 88220              | ZIP                      |
| ND W                          | WELL                     | T          | D                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | DEGREES        | MINUTES                                                              | SECONDS          |            |                          |                                         |                          |                    |                          |
| RAL A                         | LOCATION<br>(FROM GPS    | Lark       | TITUDE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 32             | 16                                                                   | 59.1             | N          | CONTRACTOR OF            | REQUIRED: ONE TEN                       | TH OF A SEC              | OND                |                          |
| GENE                          |                          | LO         | NGITUDE<br>NG WELL LOCATION T                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | O STREET ADDR  | 32<br>ESS AND COMMON                                                 | 54.6<br>LANDMARK | W<br>S-PLS |                          |                                         | IERE AVAILA              | RIF                |                          |
| 1.                            |                          |            | ederal,SE SW SW                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                |                                                                      |                  |            |                          | , , , , , , , , , , , , , , , , , , , , |                          |                    |                          |
|                               | LICENSE NO.              |            | NAME OF LICENSEI                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                | ackie D. Atkins                                                      |                  |            |                          | NAME OF WELL DR                         |                          |                    |                          |
|                               | DRILLING STA             |            | DRILLING ENDED                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                | MPLETED WELL (FT                                                     | ) ВО             | RE HO      | LE DEPTH (FT)            | DEPTH WATER FIR                         | gineering Ass            |                    |                          |
|                               | 2/11/2                   | 5          | 2/11/25                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Tempor         | ary Well Materia                                                     | ıl               |            | ±55                      |                                         | N/A                      |                    |                          |
| N                             | COMPLETED                | WELL IS:   | ARTESIAN *add<br>Centralizer info b                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | DRY HOL        | E SHALLOW                                                            | V (UNCONFI       | NED)       |                          | WATER LEVEL PLETED WELL N               | /A DAT                   | E STATIC<br>03/04/ | MEASURED<br>2025         |
| IATIC                         | DRILLING FLU             | ID:        | _ AIR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | ☐ MUD          |                                                                      | ES – SPECIFY     |            |                          |                                         |                          |                    |                          |
| FORM                          | DRILLING ME              |            | ROTARY HAM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                | E TOOL V OTHE                                                        |                  | F          | Hollow Stem              | Auger CHECK<br>INSTAL                   | HERE IF PITI<br>LED      | LESS ADAI          | TER IS                   |
| DRILLING & CASING INFORMATION | FROM                     | TO         | DIAM (inches)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | (include e     | MATERIAL AND/<br>GRADE<br>ach casing string, a<br>ections of screen) | and              | CON        | ASING<br>NECTION<br>TYPE | CASING<br>INSIDE DIAM.<br>(inches)      | CASING<br>THICK<br>(inch | NESS               | SLOT<br>SIZE<br>(inches) |
| & C/                          | 0                        | 55         | ±6.25                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 20000000       | Soil Boring                                                          | (ac              | d coup     | ling diameter)           | -                                       |                          |                    |                          |
| TINC                          |                          |            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | -              |                                                                      |                  |            |                          |                                         |                          |                    |                          |
|                               |                          |            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                |                                                                      |                  |            |                          | OSE DII RO                              | SWELL                    | NM                 |                          |
| 2.                            |                          |            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                |                                                                      |                  |            |                          | 11 MAR '2                               | 5 AM10:                  | 34                 |                          |
|                               |                          |            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                |                                                                      |                  |            |                          |                                         |                          |                    |                          |
|                               |                          |            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                |                                                                      |                  | +          |                          |                                         |                          |                    |                          |
|                               |                          |            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                |                                                                      |                  |            |                          |                                         |                          |                    |                          |
| 7                             | DEPTH (fe                | les des di | BORE HOLE<br>DIAM. (inches)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | LIST ANNUI     | AR SEAL MATERI<br>RANGE BY                                           |                  | RAVEL      | PACK SIZE-               | AMOUNT                                  | 100                      | METHO              |                          |
| ANNULAR MATERIAL              | FROM                     | то         | DIAM. (menes)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | *(if using Cen | tralizers for Artesian                                               |                  | ate the    | spacing below)           | (cubic feet)                            |                          | PLACEM             | ENT                      |
| MA                            |                          |            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                |                                                                      |                  |            |                          |                                         |                          |                    |                          |
| LAR                           |                          |            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                |                                                                      |                  |            | _                        |                                         | _                        |                    |                          |
| ANNI                          |                          |            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                |                                                                      |                  |            |                          |                                         |                          |                    |                          |
| 3.                            |                          |            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                |                                                                      |                  |            |                          |                                         |                          |                    |                          |
| FOR                           | OSE INTERNA              |            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                |                                                                      |                  |            | WR-20                    | WELL RECORD &                           | LOG (Vers                | sion 09/22         | (/2022)                  |
| FILE                          | NO. C-4                  | 929        | 220 25                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 1122           | POD NO.                                                              | 1                |            | TRN N                    |                                         |                          |                    |                          |
| LOC                           | ATION 25                 | 27.        | 33E. 23                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 423            |                                                                      |                  | 1          | WELL TAG ID              |                                         |                          | PAGE 1             | OF 2                     |

|                              | _               |              |                                   |                                                                    |                                             |               |                   |                           |                     |                                 |       |                                                            |
|------------------------------|-----------------|--------------|-----------------------------------|--------------------------------------------------------------------|---------------------------------------------|---------------|-------------------|---------------------------|---------------------|---------------------------------|-------|------------------------------------------------------------|
|                              | FROM            | feet bgl) TO | THICKNESS (feet)                  | INCLUDE WAT                                                        | ND TYPE OF<br>TER-BEARING<br>applemental sh | G CAVITIE     | S OR FRA          | CTURE ZONI                | ES                  | WATER<br>BEARING?<br>(YES / NO) | - 1   | ESTIMATED<br>YIELD FOR<br>WATER-<br>BEARING<br>ZONES (gpm) |
|                              | 0               | 24           | 24                                |                                                                    | Sand/Calich                                 | e, fine-grain | ned .Tan          |                           |                     | Y /1                            | v l   | DOTTED (gpin)                                              |
|                              | 24              | 49           | 25                                | Si                                                                 | and/Slight Calid                            |               |                   | wn                        |                     | Y / N                           | -     |                                                            |
|                              | 49              | 55           | 6                                 |                                                                    |                                             | nd, Brown     |                   | 21.00                     |                     | Y / N                           | -     |                                                            |
|                              |                 |              |                                   |                                                                    |                                             |               |                   |                           |                     | Y                               | -     |                                                            |
|                              |                 |              |                                   |                                                                    |                                             |               |                   |                           |                     | Y N                             | -     |                                                            |
| 7                            |                 |              |                                   |                                                                    |                                             |               |                   |                           |                     | Y N                             | 1     |                                                            |
| WEI                          |                 |              |                                   |                                                                    |                                             |               |                   |                           |                     | Y N                             | 1     |                                                            |
| OF                           |                 |              |                                   |                                                                    |                                             |               |                   |                           |                     | Y N                             | 1     |                                                            |
| 507                          |                 |              |                                   |                                                                    |                                             |               |                   |                           |                     | Y N                             | 1     |                                                            |
| SIC                          |                 |              |                                   |                                                                    |                                             |               |                   |                           |                     | Y N                             | 1     |                                                            |
| LOC                          |                 |              |                                   |                                                                    |                                             |               |                   |                           |                     | Y N                             | 1     |                                                            |
| GEO                          |                 |              |                                   |                                                                    |                                             |               |                   |                           |                     | Y N                             | 1     |                                                            |
| 4. HYDROGEOLOGIC LOG OF WELL |                 |              |                                   |                                                                    |                                             |               |                   |                           |                     | Y N                             | 1     |                                                            |
| HX                           |                 |              |                                   |                                                                    |                                             |               |                   |                           |                     | Y N                             | ī     |                                                            |
| 4                            |                 |              |                                   |                                                                    |                                             |               |                   |                           |                     | Y N                             |       |                                                            |
|                              |                 |              |                                   |                                                                    |                                             |               |                   |                           |                     | Y N                             | 1     |                                                            |
|                              |                 |              |                                   |                                                                    |                                             |               |                   |                           |                     | Y N                             | 1     |                                                            |
|                              |                 |              |                                   |                                                                    |                                             |               |                   |                           |                     | Y N                             |       |                                                            |
|                              |                 |              |                                   |                                                                    |                                             |               |                   |                           |                     | Y N                             |       |                                                            |
|                              |                 |              |                                   |                                                                    |                                             |               |                   |                           |                     | Y N                             |       |                                                            |
|                              |                 |              |                                   |                                                                    |                                             |               |                   |                           |                     | Y N                             |       |                                                            |
|                              | METHOD U        | SED TO ES    | TIMATE YIELD                      | OF WATER-BEARIN                                                    | G STRATA:                                   |               |                   |                           |                     | ESTIMATEI                       |       |                                                            |
|                              | PUMP            | A            | IR LIFT                           | BAILER O                                                           | THER - SPEC                                 | IFY:          |                   |                           | WELL                | YIELD (gpm                      | i):   |                                                            |
| NOIS                         | WELL TEST       | TEST STAR    | RESULTS - ATTA<br>I TIME, END TIN | ACH A COPY OF DA<br>ME, AND A TABLE S                              | TA COLLECT<br>HOWING DIS                    | ED DURIN      | G WELL<br>AND DRA | TESTING, INC              | CLUDING<br>ER THE T | DISCHARG                        | E M   | ETHOD,                                                     |
| 5. TEST; RIG SUPERVISI       | MISCELLAN       | NEOUS INF    | OC.                               | mporary well materi<br>ow ground surface(l<br>ord. Logs adapted fi | go, men nye                                 | nated bem     | Omite Chi         | ps ten feet ogs           | s to surra          | gs from total<br>ce See atta    | dep   | oth to ten feet<br>olugging                                |
| EST                          | PRINT NAM       | F(S) OF DE   | HIL RIG SUPER                     | VISOR(S) THAT PRO                                                  | VIDED ONCE                                  | TE CLIDED     | VICIONIO          |                           | H LAGE              | NOC -                           | O.    | id                                                         |
| 5. T                         | Shane Eldrid    |              |                                   | VISOR(S) THAT TRO                                                  | VIDED ONSI                                  | IE SUFER      | VISION            | F WELL CON                | SIRUCII             | ON OTHER                        | IHA   | IN LICENSEE;                                               |
| 6. SIGNATURE                 | CORRECT R       | ECORD OF     | THE ABOVE DI                      | ES THAT, TO THE E<br>ESCRIBED HOLE AN<br>DAYS AFTER COM            | ID THAT HE                                  | OR SHE W      | ILL FILE          | GE AND BEL<br>THIS WELL R | IEF, THE<br>RECORD  | FOREGOING<br>WITH THE S         | G IS  | A TRUE AND<br>TE ENGINEER                                  |
| 6. SIG                       | Jack Atkins (Ma | ar 10, 2025  |                                   | - 100 100 100 100 100 100 100 100 100 10                           | ckie D. Atkin                               | s             |                   |                           |                     | 03/10/2025                      |       |                                                            |
|                              |                 | SIGNATU      | JRE OF DRILLER                    | R / PRINT SIGNEE                                                   | NAME                                        |               |                   |                           |                     | DATE                            |       |                                                            |
|                              | OSE INTERN      | _            |                                   |                                                                    |                                             |               |                   | WR-20 WEI                 | L RECO              | RD & LOG (\                     | Versi | ion 09/22/2022)                                            |
| -                            | ENO. C-4        | 1920         |                                   | 3                                                                  | POD NO.                                     |               |                   | TRN NO.                   | 7                   | 877                             |       |                                                            |
| LOC                          | TATION 23       | 5-33         | E-23                              | 433                                                                |                                             |               | WELL              | TAG ID NO.                | NI                  | 9                               | T     | PAGE 2 OF 2                                                |

### OCD Well Locations | Karst Potential





Wells - Large Scale Karst Occurrence Potential Oil, Plugged Oil, Active Incident Release Low Oil, Cancelled Produced Water Release \_\_\_\_ PLSS Second Division Oil, New Release Other **PLSS First Division** 

1:2,257 0.01 0.03 0.06 mi 0.03 0.05

BLM, OCD, New Mexico Tech, Oil Conservation Division of the New Mexico Energy, Minerals and Natural Resources Department., Sources: Esri,

New Mexico Oil Conservation Division

OReleas 250 Im 5 9 Ang: 8/18/2025 2002:35 PM

## National Flood Hazard Layer FIRMette





#### Legend

SEE FIS REPORT FOR DETAILED LEGEND AND INDEX MAP FOR FIRM PANEL LAYOUT

Without Base Flood Elevation (BFE) With BFE or Depth Zone AE, AO, AH, VE, AR SPECIAL FLOOD HAZARD AREAS Regulatory Floodway 0.2% Annual Chance Flood Hazard, Areas of 1% annual chance flood with average depth less than one foot or with drainage areas of less than one square mile Zone X **Future Conditions 1% Annual** Chance Flood Hazard Zone X Area with Reduced Flood Risk due to Levee. See Notes. Zone X OTHER AREAS OF Area with Flood Risk due to Levee Zone D FLOOD HAZARD NO SCREEN Area of Minimal Flood Hazard Zone X Effective LOMRs OTHER AREAS Area of Undetermined Flood Hazard Zone D - - - Channel, Culvert, or Storm Sewer **GENERAL** STRUCTURES | LILLIL Levee, Dike, or Floodwall 20.2 Cross Sections with 1% Annual Chance 17.5 Water Surface Elevation **Coastal Transect** ₩₩ 513 WW Base Flood Elevation Line (BFE) Limit of Study Jurisdiction Boundary — --- Coastal Transect Baseline OTHER **Profile Baseline FEATURES** Hydrographic Feature Digital Data Available No Digital Data Available MAP PANELS Unmapped The pin displayed on the map is an approximate point selected by the user and does not represent

This map complies with FEMA's standards for the use of digital flood maps if it is not void as described below. The basemap shown complies with FEMA's basemap accuracy standards

an authoritative property location.

The flood hazard information is derived directly from the authoritative NFHL web services provided by FEMA. This map was exported on 6/18/2025 at 9:53 PM and does not reflect changes or amendments subsequent to this date and time. The NFHL and effective information may change or become superseded by new data over time.

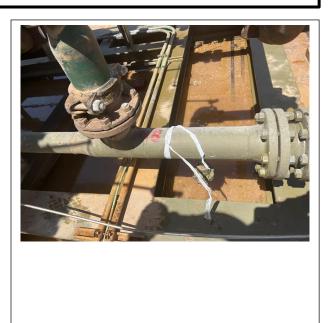
This map image is void if the one or more of the following map elements do not appear: basemap imagery, flood zone labels, legend, scale bar, map creation date, community identifiers, FIRM panel number, and FIRM effective date. Map images for unmapped and unmodernized areas cannot be used for regulatory purposes.



2,000

#### Thistle Unit 22 185H









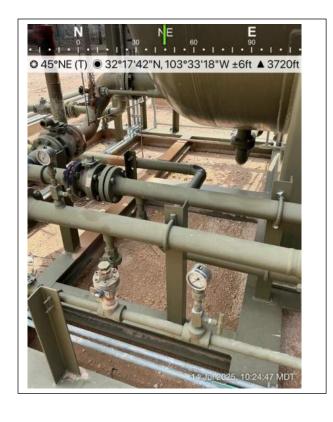
### Thistle Unit 22 185H

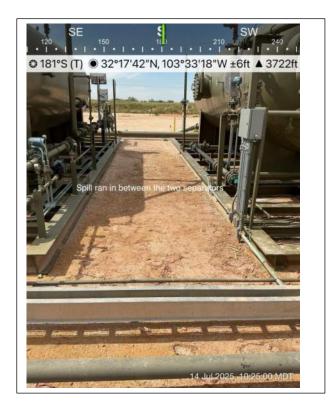


### Thistle Unit 22 185 H July 14, 2025









### Thistle Unit 22 185 H July 14, 2025









July 22, 2025

ARMANDO AGUIRRE
Safety & Environmental Solutions
703 East Clinton
Hobbs. NM 88240

RE: THISTLE UNIT 22 CBT 2 (185 H UNIT)

Enclosed are the results of analyses for samples received by the laboratory on 07/16/25 11:58.

Cardinal Laboratories is accredited through Texas NELAP under certificate number TX-C25-00101. Accreditation applies to drinking water, non-potable water and solid and chemical materials. All accredited analytes are denoted by an asterisk (\*). For a complete list of accredited analytes and matrices visit the TCEQ website at <a href="https://www.tceq.texas.gov/field/qa/lab">www.tceq.texas.gov/field/qa/lab</a> accred certif.html.

Cardinal Laboratories is accreditated through the State of Colorado Department of Public Health and Environment for:

Method EPA 552.2 Haloacetic Acids (HAA-5)
Method EPA 524.2 Total Trihalomethanes (TTHM)
Method EPA 524.4 Regulated VOCs (V1, V2, V3)

Accreditation applies to public drinking water matrices.

Celey D. Keene

This report meets NELAP requirements and is made up of a cover page, analytical results, and a copy of the original chain-of-custody. If you have any questions concerning this report, please feel free to contact me.

Sincerely,

Celey D. Keene

Lab Director/Quality Manager



#### Analytical Results For:

Safety & Environmental Solutions ARMANDO AGUIRRE 703 East Clinton Hobbs NM, 88240

Fax To: (575) 393-4388

Received: 07/16/2025 Sampling Date: 07/14/2025

Reported: 07/22/2025 Sampling Type: Soil

Project Name: THISTLE UNIT 22 CBT 2 (185 H UNIT) Sampling Condition: Cool & Intact Project Number: DEV- 25-016 Sample Received By: Alyssa Parras

Project Location: THISTLE UNIT 22 CBT 2 (185 UNIT)

#### Sample ID: AH- 1 - 6" (H254241-01)

| BTEX 8021B                           | mg/    | 'kg             | Analyze    | d By: JH     |      |            |               |        |           |
|--------------------------------------|--------|-----------------|------------|--------------|------|------------|---------------|--------|-----------|
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD    | Qualifier |
| Benzene*                             | <0.050 | 0.050           | 07/17/2025 | ND           | 2.11 | 105        | 2.00          | 0.489  |           |
| Toluene*                             | <0.050 | 0.050           | 07/17/2025 | ND           | 2.05 | 103        | 2.00          | 0.0639 |           |
| Ethylbenzene*                        | <0.050 | 0.050           | 07/17/2025 | ND           | 2.08 | 104        | 2.00          | 1.09   |           |
| Total Xylenes*                       | <0.150 | 0.150           | 07/17/2025 | ND           | 6.35 | 106        | 6.00          | 1.19   |           |
| Total BTEX                           | <0.300 | 0.300           | 07/17/2025 | ND           |      |            |               |        |           |
| Surrogate: 4-Bromofluorobenzene (PID | 103 9  | % 71.5-13       | 4          |              |      |            |               |        |           |
| Chloride, SM4500CI-B                 | mg/    | 'kg             | Analyze    | d By: AC     |      |            |               |        |           |
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD    | Qualifier |
| Chloride                             | 8000   | 16.0            | 07/17/2025 | ND           | 400  | 100        | 400           | 7.69   |           |
| TPH 8015M                            | mg/    | 'kg             | Analyze    | d By: MS     |      |            |               |        |           |
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD    | Qualifier |
| GRO C6-C10*                          | <10.0  | 10.0            | 07/17/2025 | ND           | 198  | 99.2       | 200           | 1.89   |           |
| DRO >C10-C28*                        | <10.0  | 10.0            | 07/17/2025 | ND           | 214  | 107        | 200           | 1.66   |           |
| EXT DRO >C28-C36                     | <10.0  | 10.0            | 07/17/2025 | ND           |      |            |               |        |           |
| Surrogate: 1-Chlorooctane            | 79.3   | % 44.4-14       | 5          |              |      |            |               |        |           |
| Surrogate: 1-Chlorooctadecane        | 85.7   | % 40.6-15       | 3          |              |      |            |               |        |           |

Cardinal Laboratories \*=Accredited Analyte

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whatsoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of the services hereunder by Cardinal, regardless of whether such claim is based upon any of the above stated reasons or otherwise. Results relate only to the samples identified above. This report shall not be reproduced except in full with written approval of Cardinal Laboratories.

Celey D. Keene



#### Analytical Results For:

Safety & Environmental Solutions ARMANDO AGUIRRE 703 East Clinton Hobbs NM, 88240

Fax To: (575) 393-4388

Received: 07/16/2025 Sampling Date: 07/14/2025

Reported: 07/22/2025 Sampling Type: Soil

Project Name: THISTLE UNIT 22 CBT 2 (185 H UNIT) Sampling Condition: Cool & Intact Project Number: Sample Received By: DEV- 25-016 Alyssa Parras

Project Location: THISTLE UNIT 22 CBT 2 (185 UNIT)

#### Sample ID: AH- 2 - 6" (H254241-02)

| BTEX 8021B                           | mg,    | /kg             | Analyze    | d By: JH     |      |            |               |        |           |
|--------------------------------------|--------|-----------------|------------|--------------|------|------------|---------------|--------|-----------|
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD    | Qualifier |
| Benzene*                             | <0.050 | 0.050           | 07/17/2025 | ND           | 2.11 | 105        | 2.00          | 0.489  |           |
| Toluene*                             | <0.050 | 0.050           | 07/17/2025 | ND           | 2.05 | 103        | 2.00          | 0.0639 |           |
| Ethylbenzene*                        | <0.050 | 0.050           | 07/17/2025 | ND           | 2.08 | 104        | 2.00          | 1.09   |           |
| Total Xylenes*                       | <0.150 | 0.150           | 07/17/2025 | ND           | 6.35 | 106        | 6.00          | 1.19   |           |
| Total BTEX                           | <0.300 | 0.300           | 07/17/2025 | ND           |      |            |               |        |           |
| Surrogate: 4-Bromofluorobenzene (PID | 103    | % 71.5-13       | 4          |              |      |            |               |        |           |
| Chloride, SM4500CI-B                 | mg,    | /kg             | Analyze    | d By: AC     |      |            |               |        |           |
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD    | Qualifier |
| Chloride                             | 10400  | 16.0            | 07/17/2025 | ND           | 400  | 100        | 400           | 7.69   |           |
| TPH 8015M                            | mg,    | /kg             | Analyze    | d By: MS     |      |            |               |        |           |
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD    | Qualifier |
| GRO C6-C10*                          | <10.0  | 10.0            | 07/17/2025 | ND           | 198  | 99.2       | 200           | 1.89   |           |
| DRO >C10-C28*                        | <10.0  | 10.0            | 07/17/2025 | ND           | 214  | 107        | 200           | 1.66   |           |
| EXT DRO >C28-C36                     | <10.0  | 10.0            | 07/17/2025 | ND           |      |            |               |        |           |
| Surrogate: 1-Chlorooctane            | 84.5   | % 44.4-14       | 5          |              |      |            |               |        |           |
| Surrogate: 1-Chlorooctadecane        | 88.3   | % 40.6-15       | 3          |              |      |            |               |        |           |

Cardinal Laboratories \*=Accredited Analyte

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whatsoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of the services hereunder by Cardinal, regardless of whether such claim is based upon any of the above stated reasons or otherwise. Results relate only to the samples identified above. This report shall not be reproduced except in full with written approval of Cardinal Laboratories.

Celeg D. Keene



#### Analytical Results For:

Safety & Environmental Solutions ARMANDO AGUIRRE 703 East Clinton Hobbs NM, 88240

Fax To: (575) 393-4388

Received: 07/16/2025 Sampling Date: 07/14/2025

Reported: 07/22/2025 Sampling Type: Soil

Project Name: THISTLE UNIT 22 CBT 2 (185 H UNIT) Sampling Condition: Cool & Intact Project Number: DEV- 25-016 Sample Received By: Alyssa Parras

Project Location: THISTLE UNIT 22 CBT 2 (185 UNIT)

#### Sample ID: AH- 3 - 6" (H254241-03)

| BTEX 8021B                           | mg/    | kg              | Analyze    | d By: JH     |      |            |               |        |           |
|--------------------------------------|--------|-----------------|------------|--------------|------|------------|---------------|--------|-----------|
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD    | Qualifier |
| Benzene*                             | <0.050 | 0.050           | 07/17/2025 | ND           | 2.11 | 105        | 2.00          | 0.489  |           |
| Toluene*                             | <0.050 | 0.050           | 07/17/2025 | ND           | 2.05 | 103        | 2.00          | 0.0639 |           |
| Ethylbenzene*                        | <0.050 | 0.050           | 07/17/2025 | ND           | 2.08 | 104        | 2.00          | 1.09   |           |
| Total Xylenes*                       | <0.150 | 0.150           | 07/17/2025 | ND           | 6.35 | 106        | 6.00          | 1.19   |           |
| Total BTEX                           | <0.300 | 0.300           | 07/17/2025 | ND           |      |            |               |        |           |
| Surrogate: 4-Bromofluorobenzene (PID | 103 %  | 71.5-13         | 4          |              |      |            |               |        |           |
| Chloride, SM4500Cl-B                 | mg/    | kg              | Analyze    | d By: AC     |      |            |               |        |           |
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD    | Qualifier |
| Chloride                             | 448    | 16.0            | 07/17/2025 | ND           | 400  | 100        | 400           | 7.69   |           |
| TPH 8015M                            | mg/    | kg              | Analyze    | d By: MS     |      |            |               |        |           |
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD    | Qualifier |
| GRO C6-C10*                          | <10.0  | 10.0            | 07/17/2025 | ND           | 198  | 99.2       | 200           | 1.89   |           |
| DRO >C10-C28*                        | <10.0  | 10.0            | 07/17/2025 | ND           | 214  | 107        | 200           | 1.66   |           |
| EXT DRO >C28-C36                     | <10.0  | 10.0            | 07/17/2025 | ND           |      |            |               |        |           |
| Surrogate: 1-Chlorooctane            | 80.75  | % 44.4-14       | 5          |              |      |            |               |        |           |
| Surrogate: 1-Chlorooctadecane        | 83.7 9 | % 40.6-15       | 3          |              |      |            |               |        |           |

#### Cardinal Laboratories \*=Accredited Analyte

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whatsoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of the services hereunder by Cardinal, regardless of whether such claim is based upon any of the above stated reasons or otherwise. Results relate only to the samples identified above. This report shall not be reproduced except in full with written approval of Cardinal Laboratories.

Celey D. Keine



#### Analytical Results For:

Safety & Environmental Solutions ARMANDO AGUIRRE 703 East Clinton Hobbs NM, 88240

Fax To: (575) 393-4388

Received: 07/16/2025 Sampling Date: 07/14/2025

Reported: 07/22/2025 Sampling Type: Soil

Project Name: THISTLE UNIT 22 CBT 2 (185 H UNIT) Sampling Condition: Cool & Intact Project Number: Sample Received By: DEV- 25-016 Alyssa Parras

Project Location: THISTLE UNIT 22 CBT 2 (185 UNIT)

#### Sample ID: AH- 4 - 6" (H254241-04)

| BTEX 8021B                           | mg,    | 'kg             | Analyze         | d By: JH     |      |            |               |        |           |
|--------------------------------------|--------|-----------------|-----------------|--------------|------|------------|---------------|--------|-----------|
| Analyte                              | Result | Reporting Limit | Analyzed        | Method Blank | BS   | % Recovery | True Value QC | RPD    | Qualifier |
| Benzene*                             | <0.050 | 0.050           | 07/17/2025      | ND           | 2.11 | 105        | 2.00          | 0.489  |           |
| Toluene*                             | <0.050 | 0.050           | 07/17/2025      | ND           | 2.05 | 103        | 2.00          | 0.0639 |           |
| Ethylbenzene*                        | <0.050 | 0.050           | 07/17/2025      | ND           | 2.08 | 104        | 2.00          | 1.09   |           |
| Total Xylenes*                       | <0.150 | 0.150           | 07/17/2025      | ND           | 6.35 | 106        | 6.00          | 1.19   |           |
| Total BTEX                           | <0.300 | 0.300           | 07/17/2025      | ND           |      |            |               |        |           |
| Surrogate: 4-Bromofluorobenzene (PID | 103    | % 71.5-13       | 4               |              |      |            |               |        |           |
| Chloride, SM4500CI-B                 | mg,    | 'kg             | Analyzed By: AC |              |      |            |               |        |           |
| Analyte                              | Result | Reporting Limit | Analyzed        | Method Blank | BS   | % Recovery | True Value QC | RPD    | Qualifier |
| Chloride                             | 9730   | 16.0            | 07/17/2025      | ND           | 400  | 100        | 400           | 7.69   |           |
| TPH 8015M                            | mg,    | 'kg             | Analyze         | d By: MS     |      |            |               |        |           |
| Analyte                              | Result | Reporting Limit | Analyzed        | Method Blank | BS   | % Recovery | True Value QC | RPD    | Qualifier |
| GRO C6-C10*                          | <10.0  | 10.0            | 07/17/2025      | ND           | 198  | 99.2       | 200           | 1.89   |           |
| DRO >C10-C28*                        | <10.0  | 10.0            | 07/17/2025      | ND           | 214  | 107        | 200           | 1.66   |           |
| EXT DRO >C28-C36                     | <10.0  | 10.0            | 07/17/2025      | ND           |      |            |               |        |           |
| Surrogate: 1-Chlorooctane            | 82.2   | % 44.4-14       | 5               |              |      |            |               |        |           |
| Surrogate: 1-Chlorooctadecane        | 84.8   | % 40.6-15       | 3               |              |      |            |               |        |           |

#### Cardinal Laboratories \*=Accredited Analyte

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whatsoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of the services hereunder by Cardinal, regardless of whether such claim is based upon any of the above stated reasons or otherwise. Results relate only to the samples identified above. This report shall not be reproduced except in full with written approval of Cardinal Laboratories.

Celeg D. Keene



#### Analytical Results For:

Safety & Environmental Solutions ARMANDO AGUIRRE 703 East Clinton Hobbs NM, 88240

Fax To: (575) 393-4388

Received: 07/16/2025 Sampling Date: 07/14/2025

Reported: 07/22/2025 Sampling Type: Soil

Project Name: THISTLE UNIT 22 CBT 2 (185 H UNIT) Sampling Condition: Cool & Intact
Project Number: DEV- 25-016 Sample Received By: Alyssa Parras

Analyzed By: JH

Project Location: THISTLE UNIT 22 CBT 2 (185 UNIT)

mg/kg

#### Sample ID: AH- 5 - 6" (H254241-05)

BTEX 8021B

| DILX GOZID                           | ilig/kg Ai |                 | Alldiyzo   | .u by. 511   |      |            |               |        |           |
|--------------------------------------|------------|-----------------|------------|--------------|------|------------|---------------|--------|-----------|
| Analyte                              | Result     | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD    | Qualifier |
| Benzene*                             | <0.050     | 0.050           | 07/17/2025 | ND           | 2.11 | 105        | 2.00          | 0.489  |           |
| Toluene*                             | <0.050     | 0.050           | 07/17/2025 | ND           | 2.05 | 103        | 2.00          | 0.0639 |           |
| Ethylbenzene*                        | <0.050     | 0.050           | 07/17/2025 | ND           | 2.08 | 104        | 2.00          | 1.09   |           |
| Total Xylenes*                       | <0.150     | 0.150           | 07/17/2025 | ND           | 6.35 | 106        | 6.00          | 1.19   |           |
| Total BTEX                           | <0.300     | 0.300           | 07/17/2025 | ND           |      |            |               |        |           |
| Surrogate: 4-Bromofluorobenzene (PID | 105        | % 71.5-13       | 4          |              |      |            |               |        |           |
| Chloride, SM4500CI-B                 | mg,        | /kg             | Analyze    | ed By: AC    |      |            |               |        |           |
| Analyte                              | Result     | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD    | Qualifier |
| Chloride                             | 10900      | 16.0            | 07/17/2025 | ND           | 400  | 100        | 400           | 7.69   |           |
| TPH 8015M                            | mg,        | /kg             | Analyze    | ed By: MS    |      |            |               |        |           |
| Analyte                              | Result     | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD    | Qualifier |
| GRO C6-C10*                          | <10.0      | 10.0            | 07/17/2025 | ND           | 198  | 99.2       | 200           | 1.89   |           |
| DRO >C10-C28*                        | <10.0      | 10.0            | 07/17/2025 | ND           | 214  | 107        | 200           | 1.66   |           |
| EXT DRO >C28-C36                     | <10.0      | 10.0            | 07/17/2025 | ND           |      |            |               |        |           |
| Surrogate: 1-Chlorooctane            | 80.3       | % 44.4-14       | 5          |              |      |            |               |        |           |
| Surrogate: 1-Chlorooctadecane        | 82.1       | % 40.6-15       | 3          |              |      |            |               |        |           |
|                                      |            |                 |            |              |      |            |               |        |           |

Cardinal Laboratories \*=Accredited Analyte

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whistoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of the services hereunder by Cardinal, regardless of whether such claim is based upon any of the above stated reasons or otherwise. Results related only to the samples identified above. This report shall not be reproduced except in full with written approval of Cardinal Laboratories.

Celey D. Keene



#### Analytical Results For:

Safety & Environmental Solutions ARMANDO AGUIRRE 703 East Clinton Hobbs NM, 88240

Fax To: (575) 393-4388

Received: 07/16/2025 Sampling Date: 07/14/2025

Reported: 07/22/2025 Sampling Type: Soil

Project Name: THISTLE UNIT 22 CBT 2 (185 H UNIT) Sampling Condition: Cool & Intact
Project Number: DEV- 25-016 Sample Received By: Alyssa Parras

Project Location: THISTLE UNIT 22 CBT 2 (185 UNIT)

#### Sample ID: AH- 6 - 6" (H254241-06)

| BTEX 8021B                           | mg     | /kg             | Analyze    | ed By: JH    |      |            |               |        |           |
|--------------------------------------|--------|-----------------|------------|--------------|------|------------|---------------|--------|-----------|
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD    | Qualifier |
| Benzene*                             | <0.050 | 0.050           | 07/17/2025 | ND           | 2.11 | 105        | 2.00          | 0.489  |           |
| Toluene*                             | <0.050 | 0.050           | 07/17/2025 | ND           | 2.05 | 103        | 2.00          | 0.0639 |           |
| Ethylbenzene*                        | <0.050 | 0.050           | 07/17/2025 | ND           | 2.08 | 104        | 2.00          | 1.09   |           |
| Total Xylenes*                       | <0.150 | 0.150           | 07/17/2025 | ND           | 6.35 | 106        | 6.00          | 1.19   |           |
| Total BTEX                           | <0.300 | 0.300           | 07/17/2025 | ND           |      |            |               |        |           |
| Surrogate: 4-Bromofluorobenzene (PID | 103    | % 71.5-13       | 4          |              |      |            |               |        |           |
| Chloride, SM4500CI-B                 | mg,    | /kg             | Analyze    | ed By: AC    |      |            |               |        |           |
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD    | Qualifier |
| Chloride                             | 7460   | 16.0            | 07/17/2025 | ND           | 400  | 100        | 400           | 7.69   |           |
| TPH 8015M                            | mg,    | /kg             | Analyze    | ed By: MS    |      |            |               |        |           |
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD    | Qualifier |
| GRO C6-C10*                          | <10.0  | 10.0            | 07/17/2025 | ND           | 198  | 99.2       | 200           | 1.89   |           |
| DRO >C10-C28*                        | <10.0  | 10.0            | 07/17/2025 | ND           | 214  | 107        | 200           | 1.66   |           |
| EXT DRO >C28-C36                     | <10.0  | 10.0            | 07/17/2025 | ND           |      |            |               |        |           |
| Surrogate: 1-Chlorooctane            | 82.8   | % 44.4-14       | 75         |              |      |            |               |        |           |
| Surrogate: 1-Chlorooctadecane        | 85.1   | % 40.6-15       | 3          |              |      |            |               |        |           |
|                                      |        |                 |            |              |      |            |               |        |           |

#### Cardinal Laboratories

\*=Accredited Analyte

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whistoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of the services hereunder by Cardinal, regardless of whether such claim is based upon any of the above stated reasons or otherwise. Results related only to the samples identified above. This report shall not be reproduced except in full with written approval of Cardinal Laboratories.

Celey D. Keene



#### Analytical Results For:

Safety & Environmental Solutions ARMANDO AGUIRRE 703 East Clinton Hobbs NM, 88240

Fax To: (575) 393-4388

Received: 07/16/2025 Sampling Date: 07/14/2025

Reported: 07/22/2025 Sampling Type: Soil

Project Name: THISTLE UNIT 22 CBT 2 (185 H UNIT) Sampling Condition: Cool & Intact
Project Number: DEV- 25-016 Sample Received By: Alyssa Parras

Project Location: THISTLE UNIT 22 CBT 2 (185 UNIT)

#### Sample ID: AH- 7 - 6" (H254241-07)

| BTEX 8021B                           | mg,     | /kg             | Analyze    | ed By: JH    |      |            |               |        |           |
|--------------------------------------|---------|-----------------|------------|--------------|------|------------|---------------|--------|-----------|
| Analyte                              | Result  | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD    | Qualifier |
| Benzene*                             | <0.050  | 0.050           | 07/17/2025 | ND           | 2.11 | 105        | 2.00          | 0.489  |           |
| Toluene*                             | <0.050  | 0.050           | 07/17/2025 | ND           | 2.05 | 103        | 2.00          | 0.0639 |           |
| Ethylbenzene*                        | < 0.050 | 0.050           | 07/17/2025 | ND           | 2.08 | 104        | 2.00          | 1.09   |           |
| Total Xylenes*                       | <0.150  | 0.150           | 07/17/2025 | ND           | 6.35 | 106        | 6.00          | 1.19   |           |
| Total BTEX                           | <0.300  | 0.300           | 07/17/2025 | ND           |      |            |               |        |           |
| Surrogate: 4-Bromofluorobenzene (PID | 104     | % 71.5-13       | 4          |              |      |            |               |        |           |
| Chloride, SM4500CI-B                 | mg,     | /kg             | Analyze    | ed By: AC    |      |            |               |        |           |
| Analyte                              | Result  | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD    | Qualifier |
| Chloride                             | 11300   | 16.0            | 07/17/2025 | ND           | 400  | 100        | 400           | 7.69   |           |
| TPH 8015M                            | mg,     | /kg             | Analyze    | ed By: MS    |      |            |               |        |           |
| Analyte                              | Result  | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD    | Qualifier |
| GRO C6-C10*                          | <10.0   | 10.0            | 07/17/2025 | ND           | 198  | 99.2       | 200           | 1.89   |           |
| DRO >C10-C28*                        | <10.0   | 10.0            | 07/17/2025 | ND           | 214  | 107        | 200           | 1.66   |           |
| EXT DRO >C28-C36                     | <10.0   | 10.0            | 07/17/2025 | ND           |      |            |               |        |           |
| Surrogate: 1-Chlorooctane            | 81.8    | % 44.4-14       | 5          |              |      |            |               |        |           |
| Surrogate: 1-Chlorooctadecane        | 84.8    | % 40.6-15       | 3          |              |      |            |               |        |           |
|                                      |         |                 |            |              |      |            |               |        |           |

#### Cardinal Laboratories

\*=Accredited Analyte

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whistoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of the services hereunder by Cardinal, regardless of whether such claim is based upon any of the above stated reasons or otherwise. Results relate only to the samples identified above. This report shall not be reproduced except in full with written approval of Cardinal Laboratories.

Celeg & Freene



#### Analytical Results For:

Safety & Environmental Solutions ARMANDO AGUIRRE 703 East Clinton Hobbs NM, 88240

Fax To: (575) 393-4388

Received: 07/16/2025 Sampling Date: 07/14/2025

Reported: 07/22/2025 Sampling Type: Soil

Project Name: THISTLE UNIT 22 CBT 2 (185 H UNIT) Sampling Condition: Cool & Intact
Project Number: DEV- 25-016 Sample Received By: Alyssa Parras

Project Location: THISTLE UNIT 22 CBT 2 (185 UNIT)

#### Sample ID: AH- 8 - 6" (H254241-08)

| BTEX 8021B                           | mg     | /kg             | Analyze    | d By: JH     |      |            |               |        |           |
|--------------------------------------|--------|-----------------|------------|--------------|------|------------|---------------|--------|-----------|
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD    | Qualifier |
| Benzene*                             | <0.050 | 0.050           | 07/17/2025 | ND           | 2.11 | 105        | 2.00          | 0.489  |           |
| Toluene*                             | <0.050 | 0.050           | 07/17/2025 | ND           | 2.05 | 103        | 2.00          | 0.0639 |           |
| Ethylbenzene*                        | <0.050 | 0.050           | 07/17/2025 | ND           | 2.08 | 104        | 2.00          | 1.09   |           |
| Total Xylenes*                       | <0.150 | 0.150           | 07/17/2025 | ND           | 6.35 | 106        | 6.00          | 1.19   |           |
| Total BTEX                           | <0.300 | 0.300           | 07/17/2025 | ND           |      |            |               |        |           |
| Surrogate: 4-Bromofluorobenzene (PID | 102    | % 71.5-13       | 4          |              |      |            |               |        |           |
| Chloride, SM4500CI-B                 | mg,    | /kg             | Analyze    | d By: AC     |      |            |               |        |           |
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD    | Qualifier |
| Chloride                             | 9330   | 16.0            | 07/17/2025 | ND           | 400  | 100        | 400           | 7.69   |           |
| TPH 8015M                            | mg,    | /kg             | Analyze    | d By: MS     |      |            |               |        |           |
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD    | Qualifier |
| GRO C6-C10*                          | <10.0  | 10.0            | 07/17/2025 | ND           | 198  | 99.2       | 200           | 1.89   |           |
| DRO >C10-C28*                        | <10.0  | 10.0            | 07/17/2025 | ND           | 214  | 107        | 200           | 1.66   |           |
| EXT DRO >C28-C36                     | <10.0  | 10.0            | 07/17/2025 | ND           |      |            |               |        |           |
| Surrogate: 1-Chlorooctane            | 77.6   | % 44.4-14       | 15         |              |      |            |               |        |           |
| Surrogate: 1-Chlorooctadecane        | 80.0   | % 40.6-15       | 3          |              |      |            |               |        |           |
|                                      |        |                 |            |              |      |            |               |        |           |

#### **Cardinal Laboratories**

\*=Accredited Analyte

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whistoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of the services hereunder by Cardinal, regardless of whether such claim is based upon any of the above stated reasons or otherwise. Results relate only to the samples identified above. This report shall not be reproduced except in full with written approval of Cardinal Laboratories.

Celey D. Keene



#### Analytical Results For:

Safety & Environmental Solutions ARMANDO AGUIRRE 703 East Clinton Hobbs NM, 88240

Fax To: (575) 393-4388

Received: 07/16/2025 Sampling Date: 07/14/2025

Reported: 07/22/2025 Sampling Type: Soil

Project Name: THISTLE UNIT 22 CBT 2 (185 H UNIT) Sampling Condition: Cool & Intact
Project Number: DEV- 25-016 Sample Received By: Alyssa Parras

Analyzed By: JH

Project Location: THISTLE UNIT 22 CBT 2 (185 UNIT)

mg/kg

#### Sample ID: AH- 9 - 6" (H254241-09)

BTEX 8021B

| DIEX OUZID                           | mg/ kg |                 | Allulyzo   | .u by. 511   |      |            |               |        |           |
|--------------------------------------|--------|-----------------|------------|--------------|------|------------|---------------|--------|-----------|
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD    | Qualifier |
| Benzene*                             | <0.050 | 0.050           | 07/17/2025 | ND           | 2.11 | 105        | 2.00          | 0.489  |           |
| Toluene*                             | <0.050 | 0.050           | 07/17/2025 | ND           | 2.05 | 103        | 2.00          | 0.0639 |           |
| Ethylbenzene*                        | <0.050 | 0.050           | 07/17/2025 | ND           | 2.08 | 104        | 2.00          | 1.09   |           |
| Total Xylenes*                       | <0.150 | 0.150           | 07/17/2025 | ND           | 6.35 | 106        | 6.00          | 1.19   |           |
| Total BTEX                           | <0.300 | 0.300           | 07/17/2025 | ND           |      |            |               |        |           |
| Surrogate: 4-Bromofluorobenzene (PID | 105    | % 71.5-13       | 4          |              |      |            |               |        |           |
| Chloride, SM4500CI-B                 | mg,    | /kg             | Analyze    | ed By: AC    |      |            |               |        |           |
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD    | Qualifier |
| Chloride                             | 11100  | 16.0            | 07/17/2025 | ND           | 400  | 100        | 400           | 7.69   |           |
| TPH 8015M                            | mg,    | /kg             | Analyze    | ed By: MS    |      |            |               |        |           |
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD    | Qualifier |
| GRO C6-C10*                          | <10.0  | 10.0            | 07/17/2025 | ND           | 198  | 99.2       | 200           | 1.89   |           |
| DRO >C10-C28*                        | <10.0  | 10.0            | 07/17/2025 | ND           | 214  | 107        | 200           | 1.66   |           |
| EXT DRO >C28-C36                     | <10.0  | 10.0            | 07/17/2025 | ND           |      |            |               |        |           |
| Surrogate: 1-Chlorooctane            | 78.3   | % 44.4-14       | 5          |              |      |            |               |        |           |
| Surrogate: 1-Chlorooctadecane        | 80.9   | % 40.6-15       | 3          |              |      |            |               |        |           |
|                                      |        |                 |            |              |      |            |               |        |           |

#### Cardinal Laboratories \*=Accredited Analyte

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whistoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of the services hereunder by Cardinal, regardless of whether such claim is based upon any of the above stated reasons or otherwise. Results related only to the samples identified above. This report shall not be reproduced except in full with written approval of Cardinal Laboratories.

Celey D. Keene



#### Analytical Results For:

Safety & Environmental Solutions ARMANDO AGUIRRE 703 East Clinton Hobbs NM, 88240

Fax To: (575) 393-4388

Received: 07/16/2025 Sampling Date: 07/14/2025

Reported: 07/22/2025 Sampling Type: Soil

Project Name: THISTLE UNIT 22 CBT 2 (185 H UNIT) Sampling Condition: Cool & Intact
Project Number: DEV- 25-016 Sample Received By: Alyssa Parras

Analyzed By: 14

Project Location: THISTLE UNIT 22 CBT 2 (185 UNIT)

#### Sample ID: AH- 10 - 6" (H254241-10)

RTFY 8021R

| mg/kg  |                                                                                      | Analyzed By: JH                                                                                                                                                                                                                                                                                                                                                                                         |              |        |            |               |        |           |
|--------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|--------|------------|---------------|--------|-----------|
| Result | Reporting Limit                                                                      | Analyzed                                                                                                                                                                                                                                                                                                                                                                                                | Method Blank | BS     | % Recovery | True Value QC | RPD    | Qualifier |
| <0.050 | 0.050                                                                                | 07/17/2025                                                                                                                                                                                                                                                                                                                                                                                              | ND           | 2.11   | 105        | 2.00          | 0.489  |           |
| <0.050 | 0.050                                                                                | 07/17/2025                                                                                                                                                                                                                                                                                                                                                                                              | ND           | 2.05   | 103        | 2.00          | 0.0639 |           |
| <0.050 | 0.050                                                                                | 07/17/2025                                                                                                                                                                                                                                                                                                                                                                                              | ND           | 2.08   | 104        | 2.00          | 1.09   |           |
| <0.150 | 0.150                                                                                | 07/17/2025                                                                                                                                                                                                                                                                                                                                                                                              | ND           | 6.35   | 106        | 6.00          | 1.19   |           |
| <0.300 | 0.300                                                                                | 07/17/2025                                                                                                                                                                                                                                                                                                                                                                                              | ND           |        |            |               |        |           |
| 102    | % 71.5-13                                                                            | 4                                                                                                                                                                                                                                                                                                                                                                                                       |              |        |            |               |        |           |
| mg,    | /kg                                                                                  | Analyze                                                                                                                                                                                                                                                                                                                                                                                                 | d By: AC     |        |            |               |        |           |
| Result | Reporting Limit                                                                      | Analyzed                                                                                                                                                                                                                                                                                                                                                                                                | Method Blank | BS     | % Recovery | True Value QC | RPD    | Qualifier |
| 80.0   | 16.0                                                                                 | 07/17/2025                                                                                                                                                                                                                                                                                                                                                                                              | ND           | 400    | 100        | 400           | 7.69   |           |
| mg,    | /kg                                                                                  | Analyze                                                                                                                                                                                                                                                                                                                                                                                                 | d By: MS     |        |            |               |        |           |
| Result | Reporting Limit                                                                      | Analyzed                                                                                                                                                                                                                                                                                                                                                                                                | Method Blank | BS     | % Recovery | True Value QC | RPD    | Qualifier |
| <10.0  | 10.0                                                                                 | 07/17/2025                                                                                                                                                                                                                                                                                                                                                                                              | ND           | 198    | 99.2       | 200           | 1.89   |           |
| <10.0  | 10.0                                                                                 | 07/17/2025                                                                                                                                                                                                                                                                                                                                                                                              | ND           | 214    | 107        | 200           | 1.66   |           |
| <10.0  | 10.0                                                                                 | 07/17/2025                                                                                                                                                                                                                                                                                                                                                                                              | ND           |        |            |               |        |           |
| 83.9   | % 44.4-14                                                                            | 5                                                                                                                                                                                                                                                                                                                                                                                                       |              |        |            |               |        |           |
| 86.5   | % 40.6-15                                                                            | 3                                                                                                                                                                                                                                                                                                                                                                                                       |              |        |            |               |        |           |
|        | <0.050 <0.050 <0.050 <0.150 <0.300  102 mg/ Result 80.0 mg/ Color = 10.0 <10.0 <83.9 | <ul> <li>&lt;0.050</li> <li>&lt;0.050</li> <li>&lt;0.050</li> <li>&lt;0.050</li> <li>&lt;0.050</li> <li>&lt;0.150</li> <li>&lt;0.300</li> <li>0.300</li> <li>102 % 71.5-13 mg/kg</li> <li>Result Reporting Limit</li> <li>80.0 16.0 mg/kg</li> <li>Result Reporting Limit</li> <li>&lt;10.0 10.0</li> <li>&lt;10.0 10.0</li> <li>&lt;10.0 10.0</li> <li>&lt;10.0 10.0</li> <li>&lt;10.0 10.0</li> </ul> | <0.050       | <0.050 | <0.050     | <0.050        | <0.050 | <0.050    |

#### Cardinal Laboratories \*=Accredited Analyte

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whistoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of the services hereunder by Cardinal, regardless of whether such claim is based upon any of the above stated reasons or otherwise. Results related only to the samples identified above. This report shall not be reproduced except in full with written approval of Cardinal Laboratories.

Celey D. Keene



#### Analytical Results For:

Safety & Environmental Solutions ARMANDO AGUIRRE 703 East Clinton Hobbs NM, 88240

Fax To: (575) 393-4388

Received: 07/16/2025 Sampling Date: 07/14/2025

Reported: 07/22/2025 Sampling Type: Soil

Project Name: THISTLE UNIT 22 CBT 2 (185 H UNIT) Sampling Condition: Cool & Intact
Project Number: DEV- 25-016 Sample Received By: Alyssa Parras

Analyzed By: 14

Project Location: THISTLE UNIT 22 CBT 2 (185 UNIT)

#### Sample ID: AH- 11 - 6" (H254241-11)

RTFY 8021R

| BIEX 8021B                           | mg     | /кд             | Anaiyze    | a By: JH     |      |            |               |        |           |
|--------------------------------------|--------|-----------------|------------|--------------|------|------------|---------------|--------|-----------|
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD    | Qualifier |
| Benzene*                             | <0.050 | 0.050           | 07/17/2025 | ND           | 2.11 | 105        | 2.00          | 0.489  |           |
| Toluene*                             | <0.050 | 0.050           | 07/17/2025 | ND           | 2.05 | 103        | 2.00          | 0.0639 |           |
| Ethylbenzene*                        | <0.050 | 0.050           | 07/17/2025 | ND           | 2.08 | 104        | 2.00          | 1.09   |           |
| Total Xylenes*                       | <0.150 | 0.150           | 07/17/2025 | ND           | 6.35 | 106        | 6.00          | 1.19   |           |
| Total BTEX                           | <0.300 | 0.300           | 07/17/2025 | ND           |      |            |               |        |           |
| Surrogate: 4-Bromofluorobenzene (PID | 102    | % 71.5-13       | 4          |              |      |            |               |        |           |
| Chloride, SM4500Cl-B                 | mg,    | /kg             | Analyze    | d By: AC     |      |            |               |        |           |
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD    | Qualifier |
| Chloride                             | 7060   | 16.0            | 07/17/2025 | ND           | 400  | 100        | 400           | 7.69   |           |
| TPH 8015M                            | mg,    | /kg             | Analyze    | d By: MS     |      |            |               |        |           |
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD    | Qualifier |
| GRO C6-C10*                          | <10.0  | 10.0            | 07/17/2025 | ND           | 198  | 99.2       | 200           | 1.89   |           |
| DRO >C10-C28*                        | <10.0  | 10.0            | 07/17/2025 | ND           | 214  | 107        | 200           | 1.66   |           |
| EXT DRO >C28-C36                     | <10.0  | 10.0            | 07/17/2025 | ND           |      |            |               |        |           |
| Surrogate: 1-Chlorooctane            | 74.8   | % 44.4-14       | 5          |              |      |            |               |        |           |
| Surrogate: 1-Chlorooctadecane        | 77.9   | % 40.6-15       | 3          |              |      |            |               |        |           |
|                                      |        |                 |            |              |      |            |               |        |           |

#### Cardinal Laboratories \*=Accredited Analyte

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whistoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of the services hereunder by Cardinal, regardless of whether such claim is based upon any of the above stated reasons or otherwise. Results related only to the samples identified above. This report shall not be reproduced except in full with written approval of Cardinal Laboratories.

Celey D. Keene



#### Analytical Results For:

Safety & Environmental Solutions ARMANDO AGUIRRE 703 East Clinton Hobbs NM, 88240

Fax To: (575) 393-4388

Received: 07/16/2025 Sampling Date: 07/14/2025

Reported: 07/22/2025 Sampling Type: Soil

Project Name: THISTLE UNIT 22 CBT 2 (185 H UNIT) Sampling Condition: Cool & Intact
Project Number: DEV- 25-016 Sample Received By: Alyssa Parras

Analyzed By: 14

Project Location: THISTLE UNIT 22 CBT 2 (185 UNIT)

#### Sample ID: AH- 12 - 6" (H254241-12)

RTFY 8021R

| Reporting Limit 0.050 | Analyzed                                         | Method Blank                                                                                             | BS                                                                                                                                        | % Recovery                                                                                                                                               | True Value QC                                                                                                                                                                                                                                                                                | RPD                                                                                                                                                                                                                                                                                                                             | Qualifier                                                                                                                                                                                                                     |
|-----------------------|--------------------------------------------------|----------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 0.050                 |                                                  |                                                                                                          |                                                                                                                                           | ,                                                                                                                                                        | va.ac qe                                                                                                                                                                                                                                                                                     | 1410                                                                                                                                                                                                                                                                                                                            | Qualifie                                                                                                                                                                                                                      |
|                       | 07/17/2025                                       | ND                                                                                                       | 2.15                                                                                                                                      | 107                                                                                                                                                      | 2.00                                                                                                                                                                                                                                                                                         | 2.23                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                               |
| 0.050                 | 07/17/2025                                       | ND                                                                                                       | 2.06                                                                                                                                      | 103                                                                                                                                                      | 2.00                                                                                                                                                                                                                                                                                         | 0.348                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                               |
| 0.050                 | 07/17/2025                                       | ND                                                                                                       | 2.12                                                                                                                                      | 106                                                                                                                                                      | 2.00                                                                                                                                                                                                                                                                                         | 1.06                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                               |
| 0.150                 | 07/17/2025                                       | ND                                                                                                       | 6.78                                                                                                                                      | 113                                                                                                                                                      | 6.00                                                                                                                                                                                                                                                                                         | 0.157                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                               |
| 0.300                 | 07/17/2025                                       | ND                                                                                                       |                                                                                                                                           |                                                                                                                                                          |                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                               |
| 6 71.5-13-            | 4                                                |                                                                                                          |                                                                                                                                           |                                                                                                                                                          |                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                               |
| kg                    | Analyze                                          | d By: AC                                                                                                 |                                                                                                                                           |                                                                                                                                                          |                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                               |
| Reporting Limit       | Analyzed                                         | Method Blank                                                                                             | BS                                                                                                                                        | % Recovery                                                                                                                                               | True Value QC                                                                                                                                                                                                                                                                                | RPD                                                                                                                                                                                                                                                                                                                             | Qualifier                                                                                                                                                                                                                     |
| 16.0                  | 07/17/2025                                       | ND                                                                                                       | 432                                                                                                                                       | 108                                                                                                                                                      | 400                                                                                                                                                                                                                                                                                          | 3.64                                                                                                                                                                                                                                                                                                                            | QM-07                                                                                                                                                                                                                         |
| kg                    | Analyze                                          | d By: MS                                                                                                 |                                                                                                                                           |                                                                                                                                                          |                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                               |
| Reporting Limit       | Analyzed                                         | Method Blank                                                                                             | BS                                                                                                                                        | % Recovery                                                                                                                                               | True Value QC                                                                                                                                                                                                                                                                                | RPD                                                                                                                                                                                                                                                                                                                             | Qualifier                                                                                                                                                                                                                     |
| 10.0                  | 07/17/2025                                       | ND                                                                                                       | 198                                                                                                                                       | 99.2                                                                                                                                                     | 200                                                                                                                                                                                                                                                                                          | 1.89                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                               |
| 10.0                  | 07/17/2025                                       | ND                                                                                                       | 214                                                                                                                                       | 107                                                                                                                                                      | 200                                                                                                                                                                                                                                                                                          | 1.66                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                               |
| 10.0                  | 07/17/2025                                       | ND                                                                                                       |                                                                                                                                           |                                                                                                                                                          |                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                               |
| % 44.4-14.            | 5                                                |                                                                                                          |                                                                                                                                           |                                                                                                                                                          |                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                               |
|                       |                                                  |                                                                                                          |                                                                                                                                           |                                                                                                                                                          |                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                               |
|                       | 16.0 <b>kg</b> Reporting Limit  10.0  10.0  10.0 | 16.0 07/17/2025  kg Analyze  Reporting Limit Analyzed  10.0 07/17/2025  10.0 07/17/2025  10.0 07/17/2025 | 16.0 07/17/2025 ND  kg Analyzed By: MS  Reporting Limit Analyzed Method Blank  10.0 07/17/2025 ND  10.0 07/17/2025 ND  10.0 07/17/2025 ND | 16.0 07/17/2025 ND 432  kg Analyzed By: MS  Reporting Limit Analyzed Method Blank BS  10.0 07/17/2025 ND 198  10.0 07/17/2025 ND 214  10.0 07/17/2025 ND | 16.0     07/17/2025     ND     432     108       kg     Analyzed By: MS       Reporting Limit     Analyzed     Method Blank     BS     % Recovery       10.0     07/17/2025     ND     198     99.2       10.0     07/17/2025     ND     214     107       10.0     07/17/2025     ND     ND | 16.0     07/17/2025     ND     432     108     400       kg     Analyzed By: MS       Reporting Limit     Analyzed     Method Blank     BS     % Recovery     True Value QC       10.0     07/17/2025     ND     198     99.2     200       10.0     07/17/2025     ND     214     107     200       10.0     07/17/2025     ND | 16.0 07/17/2025 ND 432 108 400 3.64  kg Analyzed By: MS  Reporting Limit Analyzed Method Blank BS % Recovery True Value QC RPD  10.0 07/17/2025 ND 198 99.2 200 1.89  10.0 07/17/2025 ND 214 107 200 1.66  10.0 07/17/2025 ND |

#### Cardinal Laboratories \*=Accredited Analyte

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whistoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of the services hereunder by Cardinal, regardless of whether such claim is based upon any of the above stated reasons or otherwise. Results related only to the samples identified above. This report shall not be reproduced except in full with written approval of Cardinal Laboratories.

Celecy D. Keene



#### Analytical Results For:

Safety & Environmental Solutions ARMANDO AGUIRRE 703 East Clinton Hobbs NM, 88240

Fax To: (575) 393-4388

Received: 07/16/2025 Sampling Date: 07/14/2025

Reported: 07/22/2025 Sampling Type: Soil

Project Name: THISTLE UNIT 22 CBT 2 (185 H UNIT) Sampling Condition: Cool & Intact Project Number: Sample Received By: DEV- 25-016 Alyssa Parras

Project Location: THISTLE UNIT 22 CBT 2 (185 UNIT)

#### Sample ID: HP- 1 - 6" (H254241-13)

| BTEX 8021B                           | mg,    | 'kg             | Analyze    | d By: JH     |      |            |               |       |           |
|--------------------------------------|--------|-----------------|------------|--------------|------|------------|---------------|-------|-----------|
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD   | Qualifier |
| Benzene*                             | <0.050 | 0.050           | 07/17/2025 | ND           | 2.15 | 107        | 2.00          | 2.23  |           |
| Toluene*                             | <0.050 | 0.050           | 07/17/2025 | ND           | 2.06 | 103        | 2.00          | 0.348 |           |
| Ethylbenzene*                        | <0.050 | 0.050           | 07/17/2025 | ND           | 2.12 | 106        | 2.00          | 1.06  |           |
| Total Xylenes*                       | <0.150 | 0.150           | 07/17/2025 | ND           | 6.78 | 113        | 6.00          | 0.157 |           |
| Total BTEX                           | <0.300 | 0.300           | 07/17/2025 | ND           |      |            |               |       |           |
| Surrogate: 4-Bromofluorobenzene (PID | 116    | % 71.5-13       | 4          |              |      |            |               |       |           |
| Chloride, SM4500CI-B                 | mg,    | 'kg             | Analyze    | d By: AC     |      |            |               |       |           |
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD   | Qualifier |
| Chloride                             | 96.0   | 16.0            | 07/17/2025 | ND           | 432  | 108        | 400           | 3.64  |           |
| TPH 8015M                            | mg,    | 'kg             | Analyze    | d By: MS     |      |            |               |       |           |
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD   | Qualifier |
| GRO C6-C10*                          | <10.0  | 10.0            | 07/17/2025 | ND           | 198  | 99.2       | 200           | 1.89  |           |
| DRO >C10-C28*                        | <10.0  | 10.0            | 07/17/2025 | ND           | 214  | 107        | 200           | 1.66  |           |
| EXT DRO >C28-C36                     | <10.0  | 10.0            | 07/17/2025 | ND           |      |            |               |       |           |
| Surrogate: 1-Chlorooctane            | 82.8   | % 44.4-14       | 5          |              |      |            |               |       |           |
| Surrogate: 1-Chlorooctadecane        | 84.5   | % 40.6-15       | 3          |              |      |            |               |       |           |

#### Cardinal Laboratories \*=Accredited Analyte

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whatsoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of the services hereunder by Cardinal, regardless of whether such claim is based upon any of the above stated reasons or otherwise. Results relate only to the samples identified above. This report shall not be reproduced except in full with written approval of Cardinal Laboratories.

Celeg D. Keene



#### Analytical Results For:

Safety & Environmental Solutions ARMANDO AGUIRRE 703 East Clinton Hobbs NM, 88240

Fax To: (575) 393-4388

Received: 07/16/2025 Sampling Date: 07/14/2025

Reported: 07/22/2025 Sampling Type: Soil

Project Name: THISTLE UNIT 22 CBT 2 (185 H UNIT) Sampling Condition: Cool & Intact Project Number: DEV- 25-016 Sample Received By: Alyssa Parras

Project Location: THISTLE UNIT 22 CBT 2 (185 UNIT)

#### Sample ID: HP- 2 - 6" (H254241-14)

| BTEX 8021B                           | mg,    | /kg             | Analyze         | d By: JH     |      |            |               |       |           |
|--------------------------------------|--------|-----------------|-----------------|--------------|------|------------|---------------|-------|-----------|
| Analyte                              | Result | Reporting Limit | Analyzed        | Method Blank | BS   | % Recovery | True Value QC | RPD   | Qualifier |
| Benzene*                             | <0.050 | 0.050           | 07/17/2025      | ND           | 2.15 | 107        | 2.00          | 2.23  |           |
| Toluene*                             | <0.050 | 0.050           | 07/17/2025      | ND           | 2.06 | 103        | 2.00          | 0.348 |           |
| Ethylbenzene*                        | <0.050 | 0.050           | 07/17/2025      | ND           | 2.12 | 106        | 2.00          | 1.06  |           |
| Total Xylenes*                       | <0.150 | 0.150           | 07/17/2025      | ND           | 6.78 | 113        | 6.00          | 0.157 |           |
| Total BTEX                           | <0.300 | 0.300           | 07/17/2025      | ND           |      |            |               |       |           |
| Surrogate: 4-Bromofluorobenzene (PID | 114 9  | % 71.5-13       | 4               |              |      |            |               |       |           |
| Chloride, SM4500CI-B                 | mg,    | /kg             | Analyzed By: AC |              |      |            |               |       |           |
| Analyte                              | Result | Reporting Limit | Analyzed        | Method Blank | BS   | % Recovery | True Value QC | RPD   | Qualifier |
| Chloride                             | 112    | 16.0            | 07/17/2025      | ND           | 432  | 108        | 400           | 3.64  |           |
| TPH 8015M                            | mg,    | /kg             | Analyze         | d By: MS     |      |            |               |       |           |
| Analyte                              | Result | Reporting Limit | Analyzed        | Method Blank | BS   | % Recovery | True Value QC | RPD   | Qualifier |
| GRO C6-C10*                          | <10.0  | 10.0            | 07/17/2025      | ND           | 198  | 99.2       | 200           | 1.89  |           |
| DRO >C10-C28*                        | <10.0  | 10.0            | 07/17/2025      | ND           | 214  | 107        | 200           | 1.66  |           |
| EXT DRO >C28-C36                     | <10.0  | 10.0            | 07/17/2025      | ND           |      |            |               |       |           |
| Surrogate: 1-Chlorooctane            | 72.5   | % 44.4-14       | 5               |              |      |            |               |       |           |
| Surrogate: 1-Chlorooctadecane        | 74.8   | % 40.6-15       | 3               |              |      |            |               |       |           |

#### Cardinal Laboratories \*=Accredited Analyte

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whatsoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of the services hereunder by Cardinal, regardless of whether such claim is based upon any of the above stated reasons or otherwise. Results relate only to the samples identified above. This report shall not be reproduced except in full with written approval of Cardinal Laboratories.

Celey D. Keene



#### Analytical Results For:

Safety & Environmental Solutions ARMANDO AGUIRRE 703 East Clinton Hobbs NM, 88240

Fax To: (575) 393-4388

Received: 07/16/2025 Sampling Date: 07/14/2025

Reported: 07/22/2025 Sampling Type: Soil

Project Name: THISTLE UNIT 22 CBT 2 (185 H UNIT) Sampling Condition: Cool & Intact Project Number: Sample Received By: DEV- 25-016 Alyssa Parras

Project Location: THISTLE UNIT 22 CBT 2 (185 UNIT)

#### Sample ID: HP- 3 - SS (H254241-15)

| BTEX 8021B                           | mg,    | /kg             | Analyze    | d By: JH     |      |            |               |       |           |
|--------------------------------------|--------|-----------------|------------|--------------|------|------------|---------------|-------|-----------|
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD   | Qualifier |
| Benzene*                             | <0.050 | 0.050           | 07/17/2025 | ND           | 2.15 | 107        | 2.00          | 2.23  |           |
| Toluene*                             | <0.050 | 0.050           | 07/17/2025 | ND           | 2.06 | 103        | 2.00          | 0.348 |           |
| Ethylbenzene*                        | <0.050 | 0.050           | 07/17/2025 | ND           | 2.12 | 106        | 2.00          | 1.06  |           |
| Total Xylenes*                       | <0.150 | 0.150           | 07/17/2025 | ND           | 6.78 | 113        | 6.00          | 0.157 |           |
| Total BTEX                           | <0.300 | 0.300           | 07/17/2025 | ND           |      |            |               |       |           |
| Surrogate: 4-Bromofluorobenzene (PID | 114 9  | % 71.5-13       | 4          |              |      |            |               |       |           |
| Chloride, SM4500CI-B                 | mg,    | /kg             | Analyze    | d By: AC     |      |            |               |       |           |
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD   | Qualifier |
| Chloride                             | 64.0   | 16.0            | 07/17/2025 | ND           | 432  | 108        | 400           | 3.64  |           |
| TPH 8015M                            | mg,    | /kg             | Analyze    | d By: MS     |      |            |               |       |           |
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD   | Qualifier |
| GRO C6-C10*                          | <10.0  | 10.0            | 07/17/2025 | ND           | 198  | 99.2       | 200           | 1.89  |           |
| DRO >C10-C28*                        | <10.0  | 10.0            | 07/17/2025 | ND           | 214  | 107        | 200           | 1.66  |           |
| EXT DRO >C28-C36                     | <10.0  | 10.0            | 07/17/2025 | ND           |      |            |               |       |           |
| Surrogate: 1-Chlorooctane            | 76.6   | % 44.4-14       | 5          |              |      |            |               |       |           |
| Surrogate: 1-Chlorooctadecane        | 77.8   | % 40.6-15       | 3          |              |      |            |               |       |           |

Cardinal Laboratories \*=Accredited Analyte

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whatsoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of the services hereunder by Cardinal, regardless of whether such claim is based upon any of the above stated reasons or otherwise. Results relate only to the samples identified above. This report shall not be reproduced except in full with written approval of Cardinal Laboratories.

Celeg D. Keene



### PHONE (575) 393-2326 ° 101 E. MARLAND ° HOBBS, NM 88240

### Analytical Results For:

Safety & Environmental Solutions ARMANDO AGUIRRE 703 East Clinton Hobbs NM, 88240

Fax To: (575) 393-4388

Received: 07/16/2025 Sampling Date: 07/14/2025

Reported: 07/22/2025 Sampling Type: Soil

Project Name: THISTLE UNIT 22 CBT 2 (185 H UNIT) Sampling Condition: Cool & Intact
Project Number: DEV- 25-016 Sample Received By: Alyssa Parras

Project Location: THISTLE UNIT 22 CBT 2 (185 UNIT)

### Sample ID: HP- 4 - SS (H254241-16)

| BTEX 8021B                           | mg     | /kg             | Analyze    | ed By: JH    |      |            |               |       |           |
|--------------------------------------|--------|-----------------|------------|--------------|------|------------|---------------|-------|-----------|
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD   | Qualifier |
| Benzene*                             | <0.050 | 0.050           | 07/17/2025 | ND           | 2.15 | 107        | 2.00          | 2.23  |           |
| Toluene*                             | <0.050 | 0.050           | 07/17/2025 | ND           | 2.06 | 103        | 2.00          | 0.348 |           |
| Ethylbenzene*                        | <0.050 | 0.050           | 07/17/2025 | ND           | 2.12 | 106        | 2.00          | 1.06  |           |
| Total Xylenes*                       | <0.150 | 0.150           | 07/17/2025 | ND           | 6.78 | 113        | 6.00          | 0.157 |           |
| Total BTEX                           | <0.300 | 0.300           | 07/17/2025 | ND           |      |            |               |       |           |
| Surrogate: 4-Bromofluorobenzene (PID | 113    | % 71.5-13       | 4          |              |      |            |               |       |           |
| Chloride, SM4500CI-B                 | mg,    | /kg             | Analyze    | ed By: AC    |      |            |               |       |           |
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD   | Qualifier |
| Chloride                             | 80.0   | 16.0            | 07/17/2025 | ND           | 432  | 108        | 400           | 3.64  |           |
| TPH 8015M                            | mg,    | /kg             | Analyze    | ed By: MS    |      |            |               |       |           |
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD   | Qualifier |
| GRO C6-C10*                          | <10.0  | 10.0            | 07/17/2025 | ND           | 198  | 99.2       | 200           | 1.89  |           |
| DRO >C10-C28*                        | <10.0  | 10.0            | 07/17/2025 | ND           | 214  | 107        | 200           | 1.66  |           |
| EXT DRO >C28-C36                     | <10.0  | 10.0            | 07/17/2025 | ND           |      |            |               |       |           |
| Surrogate: 1-Chlorooctane            | 70.8   | % 44.4-14       | 15         |              |      |            |               |       |           |
| Surrogate: 1-Chlorooctadecane        | 71.8   | % 40.6-15       | 3          |              |      |            |               |       |           |
|                                      |        |                 |            |              |      |            |               |       |           |

### Cardinal Laboratories

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whistoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of the services hereunder by Cardinal, regardless of whether such claim is based upon any of the above stated reasons or otherwise. Results relate only to the samples identified above. This report shall not be reproduced except in full with written approval of Cardinal Laboratories.

Celey D. Keene

Celey D. Keene, Lab Director/Quality Manager

\*=Accredited Analyte



PHONE (575) 393-2326 ° 101 E. MARLAND ° HOBBS, NM 88240

### Analytical Results For:

Safety & Environmental Solutions ARMANDO AGUIRRE 703 East Clinton Hobbs NM, 88240

Fax To: (575) 393-4388

Received: 07/16/2025 Sampling Date: 07/14/2025

Reported: 07/22/2025 Sampling Type: Soil

Project Name: THISTLE UNIT 22 CBT 2 (185 H UNIT) Sampling Condition: Cool & Intact
Project Number: DEV- 25-016 Sample Received By: Alyssa Parras

Project Location: THISTLE UNIT 22 CBT 2 (185 UNIT)

### Sample ID: HP- 5 - SS (H254241-17)

| BTEX 8021B                           | mg     | /kg             | Analyze    | d By: JH     |      |            |               |       |           |
|--------------------------------------|--------|-----------------|------------|--------------|------|------------|---------------|-------|-----------|
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD   | Qualifier |
| Benzene*                             | <0.050 | 0.050           | 07/17/2025 | ND           | 2.15 | 107        | 2.00          | 2.23  |           |
| Toluene*                             | <0.050 | 0.050           | 07/17/2025 | ND           | 2.06 | 103        | 2.00          | 0.348 |           |
| Ethylbenzene*                        | <0.050 | 0.050           | 07/17/2025 | ND           | 2.12 | 106        | 2.00          | 1.06  |           |
| Total Xylenes*                       | <0.150 | 0.150           | 07/17/2025 | ND           | 6.78 | 113        | 6.00          | 0.157 |           |
| Total BTEX                           | <0.300 | 0.300           | 07/17/2025 | ND           |      |            |               |       |           |
| Surrogate: 4-Bromofluorobenzene (PID | 114    | % 71.5-13       | 4          |              |      |            |               |       |           |
| Chloride, SM4500Cl-B                 | mg,    | /kg             | Analyze    | d By: AC     |      |            |               |       |           |
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD   | Qualifier |
| Chloride                             | 208    | 16.0            | 07/17/2025 | ND           | 432  | 108        | 400           | 3.64  |           |
| TPH 8015M                            | mg     | /kg             | Analyze    | d By: MS     |      |            |               |       |           |
| Analyte                              | Result | Reporting Limit | Analyzed   | Method Blank | BS   | % Recovery | True Value QC | RPD   | Qualifier |
| GRO C6-C10*                          | <10.0  | 10.0            | 07/17/2025 | ND           | 198  | 99.2       | 200           | 1.89  |           |
| DRO >C10-C28*                        | <10.0  | 10.0            | 07/17/2025 | ND           | 214  | 107        | 200           | 1.66  |           |
| EXT DRO >C28-C36                     | <10.0  | 10.0            | 07/17/2025 | ND           |      |            |               |       |           |
| Surrogate: 1-Chlorooctane            | 72.3   | % 44.4-14       | 5          |              |      |            |               |       |           |
| Surrogate: 1-Chlorooctadecane        | 73.9   | % 40.6-15       | 3          |              |      |            |               |       |           |

### Cardinal Laboratories

\*=Accredited Analyte

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whatsoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client; subsidiaries, affiliates or successors arising out of or related to the performance of the services hereunder by Cardinal, regardless of whether such claim is based upon any of the above stated reasons or otherwise. Results relate only to the samples identified above. This report shall not be reproduced except in full with written approval of Cardinal Laboratories.

Celey D. Keene

Celey D. Keene, Lab Director/Quality Manager



PHONE (575) 393-2326 ° 101 E. MARLAND ° HOBBS, NM 88240

### **Notes and Definitions**

QM-07 The spike recovery was outside acceptance limits for the MS and/or MSD. The batch was accepted based on acceptable LCS

recovery.

ND Analyte NOT DETECTED at or above the reporting limit

RPD Relative Percent Difference

\*\* Samples not received at proper temperature of 6°C or below.

\*\*\* Insufficient time to reach temperature.

- Chloride by SM4500Cl-B does not require samples be received at or below 6°C

Samples reported on an as received basis (wet) unless otherwise noted on report

Cardinal Laboratories \*=Accredited Analyte

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whistoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of the services hereunder by Cardinal, regardless of whether such claim is based upon any of the above stated reasons or otherwise. Results relate only to the samples identified above. This report shall not be reproduced except in full with written approval of Cardinal Laboratories.

Celeg D. Keene

Celey D. Keene, Lab Director/Quality Manager



101 East Marland, Hobbs, NM 88240 (675) 383-2326 FAX (675) 383-2475

| Armando Aguirre  Resist Clinton, PO Box 1813  Seast Clinto | m ver | srodriguez@sesi-nm.com | (Initials)                                                                                                                         | Sample Condition Cood Intact Yes Yes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | · Bus · Other: S 72 /#/40                                                                                                                                                                                           | Sampler - UPS -           |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|------------------------|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|
| AMALYSIS  ass: 703 East Clinton, PO Box 1813  ass: 575 387-0510  bits: NM Zig: 88240  cits: DEV-25-016  broad: 575 383-4388  cits: DEV-25-016  broad: 575 383-4388  cits: OEL-25-016  broad: Address:  cits: DEV-25-016  broad: 575 383-4388  cits: OEL-25-016  cits: OEL-25-0 | 3     | kywatson@sesi-nm.com   |                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                     |                           |
| AMALYSIS  Series and Company Pools 1813  Series NM Zip: 88240 Ann:  Hobbs  Setts: NM Zip: 88240 Ann:  Company: DEVON Brass  Hobbs  Setts: NM Zip: 88240 Ann:  Company: DEVON Brass  Company: DEVON Bra |       | sbabb@sesi-nm.com      |                                                                                                                                    | Received By:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | ,                                                                                                                                                                                                                   | Relinguished B            |
| AMB   PROBERT   AMB      |       | o@sosi_nm              | )<br>-                                                                                                                             | aporro                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 1692                                                                                                                                                                                                                | trick v                   |
| AMAL - 2 - 6   AM - 3 - 6       |       | If: D Yes              |                                                                                                                                    | Received by:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                     | Kalinquished              |
| ANALYSIS  ass: 703 East Clinton, PO Box 1613  ass: 703 East Clinton, PO Box 1613  ass: 575 397-0510  ass: 575 397-0510  billo. Sample I.D.  assestive Project Owner:  clessification: Thistic Unit 22 CTD 2 (195 Hunis) State: 2lp:  clessification: Thistic Unit 22 CTD 2 (195 Hunis) State: 2lp:  clessification: Thistic Unit 22 CTD 2 (195 Hunis) State: 2lp:  clessification: Thistic Unit 22 CTD 2 (195 Hunis) State: 2lp:  clessification: Thistic Unit 22 CTD 2 (195 Hunis) State: 2lp:  clessification: Thistic Unit 22 CTD 2 (195 Hunis) State: 2lp:  clessification: Thistic Unit 22 CTD 2 (195 Hunis) State: 2lp:  clessification: Thistic Unit 22 CTD 2 (195 Hunis) State: 2lp:  clessification: Thistic Unit 22 CTD 2 (195 Hunis) State: 2lp:  clessification: Thistic Unit 22 CTD 2 (195 Hunis) State: 2lp:  clessification: Thistic Unit 22 CTD 2 (195 Hunis) State: 2lp:  clessification: Thistic Unit 22 CTD 2 (195 Hunis) State: 2lp:  clessification: Thistic Unit 22 CTD 2 (195 Hunis) State: 2lp:  clessification: Thistic Unit 22 CTD 2 (195 Hunis) State: 2lp:  clessification: Thistic Unit 22 CTD 2 (195 Hunis) State: 2lp:  clessification: Thistic Unit 22 CTD 2 (195 Hunis) State: 2lp:  clessification: Thistic Unit 22 CTD 2 (195 Hunis) State: 2lp:  clessification: Thistic Unit 22 CTD 2 (195 Hunis) State: 2lp:  clessification: Thistic Unit 22 CTD 2 (195 Hunis) State: 2lp:  clessification: Thistic Unit 22 CTD 2 (195 Hunis) State: 2lp:  clessification: Thistic Unit 22 CTD 2 (195 Hunis) State: 2lp:  clessification: Thistic Unit 22 CTD 2 (195 Hunis) State: 2lp:  clessification: Thistic Unit 22 CTD 2 (195 Hunis) State: 2lp:  clessification: Thistic Unit 22 CTD 2 (195 Hunis) State: 2lp:  clessification: Thistic Unit 22 CTD 2 (195 Hunis) State: 2lp:  clessification: Thistic Unit 22 CTD 2 (195 Hunis) State: 2lp:  clessification: Thistic Unit 22 CTD 2 (195 Hunis) State: 2lp:  clessification: Thistic Unit 22 CTD 2 (195 Hunis) State: 2lp:  clessification: Thistic Unit 22 CTD 2 (195 Hunis) State: 2lp:  clessification: Thistic Unit 22 CTD 2 (195 Hunis) Sta |       |                        | served by Ceronel Within 30 days after o<br>set use, or loss of profits induited by els<br>asset upon any of the above stated mass | edinod firfladen, budness inderuptone, loss<br>Althout firfladen, budness inderuptone, loss<br>transporter de l'architecture d | and when our negregation and any other cause massesses state as a cardinal be said for indicated or consequents damages, including this set at a cardinal be a said to the conformation of somition hereunism by C. | annico, in no event shall |
| ANALYSIS  ass: 703 East Clinton, PO Box 1813  attentions  attentio |       | 7 Day Ground By Bloom  | left, shirt be irrited to the amount paid t                                                                                        | y claim enaing which be based in contract or                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | A 4 - 10-65 and Duragea. Cardinal's fishility and client's exclusive remedy for an                                                                                                                                  | PLEASE HOTE! UADRY        |
| ANALYSIS  Analys |       | 1:32     1             | 7 W 25                                                                                                                             | 12                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 6                                                                                                                                                                                                                   | 9                         |
| ANALYSIS  ANALYS |       | 1.30                   | 72 W. tt                                                                                                                           | 12                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 8.6"                                                                                                                                                                                                                | 04                        |
| Spirity and Citytich Rights Solutions  et Manager Armando Aguirre  et: 703 East Clinton, PO Box 1813  Company: DEV on Brand  Hobbs State: NM Zip: 88240  et: 575 397-0510  Fax #: 575 393-4588  ct Name: Thistee Unit 72 CTD 2 (195 H Vail) State: Zip:  et Location: Thistee Unit 72 CTD 2 (195 H Vail) State: Zip:  et Location: Thistee Unit 72 CTD 2 (195 H Vail) State: Zip:  et Name: Emmu 7 12040  bl.D. Sample I.D. Grand Water  Both Reservy Sampluko  ANALYSIS  ANALYSIS  ANALYSIS  Andrews:  City: Company: DEV on Brand  Atth:  City: City |       | 1:23                   | 52.hl.£                                                                                                                            | 12                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 3-4                                                                                                                                                                                                                 | 4                         |
| Spirity and civitioning odutions  et Manager Armando Aguirre  ses: 703 East Clinton, PO Box 1813  Company: DEV on Brand  Hobbs State: NM Zip: 88240  ett: 575 397-0510  Fax #: 575 393-4388  ctt NDEV - 25 - O/6 Project Owner  ct Name: Thistee Unit 22 CTD 2 (185 H Vnii) State: Zip:  ct Name: Chame Thistee Unit 22 CTD 2 (185 H Vnii) State: Zip:  ct Name: Chame Thistee Unit 22 CTD 2 (185 H Vnii) State: Zip:  ct Name: Chame Thistee Unit 22 CTD 2 (185 H Vnii) State: Zip:  ct Name: Chame Thistee Unit 22 CTD 2 (185 H Vnii) State: Zip:  ct Name: Chame Thistee Unit 22 CTD 2 (185 H Vnii) State: Zip:  ct Name: Chame Thistee Unit 22 CTD 2 (185 H Vnii) State: Zip:  ct Name: Chame Thistee Unit 22 CTD 2 (185 H Vnii) State: Zip:  ct Name: Chame Thistee Unit 22 CTD 2 (185 H Vnii) State: Zip:  ct Name: Chame Thistee Unit 22 CTD 2 (185 H Vnii) State: Zip:  ct Name: Chame Thistee Unit 22 CTD 2 (185 H Vnii) State: Zip:  ct Name: Chame Thistee Unit 22 CTD 2 (185 H Vnii) State: Zip:  ct Name: Chame Thistee Unit 22 CTD 2 (185 H Vnii) State: Zip:  ct Name: Chame Thistee Unit 22 CTD 2 (185 H Vnii) State: Zip:  ct Name: Chame Thistee Unit 22 CTD 2 (185 H Vnii) State: Zip:  ct Name: Chame Thistee Unit 22 CTD 2 (185 H Vnii) State: Zip:  ct Name: Chame Thistee Unit 22 CTD 2 (185 H Vnii) State: Zip:  ct Name: Chame Thistee Unit 22 CTD 2 (185 H Vnii) State: Zip:  ct Name: Chame Thistee Unit 22 CTD 2 (185 H Vnii) State: Zip:  ct Name: Chame Thistee Unit 22 CTD 2 (185 H Vnii) State: Zip:  ct Name: Chame Thistee Unit 22 CTD 2 (185 H Vnii) State: Zip:  ct Name: Chame Thistee Unit 22 CTD 2 (185 H Vnii) State: Zip:  ct Name: Chame Thistee Unit 22 CTD 2 (185 H Vnii) State: Zip:  ct Name: Chame Thistee Unit 22 CTD 2 (185 H Vnii) State: Zip:  ct Name: Chame Thistee Unit 22 CTD 2 (185 H Vnii) State: Zip:  ct Name: Chame Thistee Unit 22 CTD 2 (185 H Vnii) State: Zip:  ct Name: Chame Thistee Unit 22 CTD 2 (185 H Vnii) State: Zip:  ct Name: Chame Thistee Unit 22 CTD 2 (185 H Vnii) State: Zip:  ct Name: Chame Thistee Unit 22 CTD 2 (185 H Vnii) State: Zip:  c |       | 1,24                   | 2.14.2                                                                                                                             | 7                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 6-6                                                                                                                                                                                                                 | 4                         |
| Spring and Environminimal Scholors  State: NAME State: NAME STATE  |       | 1:23                   | 53.h/t                                                                                                                             | 4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | W.                                                                                                                                                                                                                  | 4.                        |
| Spirity and cirvilioning intermediate Solutions  et Manager: Armando Aguirre  ses: 703 East Clinton, PO Box 1813  State: NM ZIp: 88240  Attn:  et: 575 397-0510  Fax #: 575 393-4388  Address:  et Location: Thistle Unit 22 CTD 2 (185 Hunis) State: Zip:  et Location: Thistle Unit 22 CTD 2 (185 Hunis) State: Zip:  et Name: Cmmu 7 120m  MATRIX PRESERV SAMPLING  BILD. Sample I.D.  GRANDERSERV SAMPLING  PRESERV SAMPLING  AH-1-6"  GLA K X 7-14-81;12 X X X X 7-14-81;12 X X X X 7-14-81;12 X X X X 7-14-81;12 X X X X X X X X X X X X X X X X X X X                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |       | 1:20                   |                                                                                                                                    | 7                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                     | r<br>L                    |
| ANALYSIS of Manager: Armando Aguirre  ess: 703 East Clinton, PO Box 1613  PO Box 1613  State: NM ZIP: 88240  Attn:  e#: 575 397-0510  Fax #: 575 393-4388  Address:  ct Name: Thiste un't zz cto z (185 H un's) State: ZIP:  ct Name: Thiste un't zz cto z (185 H un's) State: ZIP:  et Location: Thiste un't zz cto z (185 H un's) State: ZIP:  et Location: Thiste un't zz cto z (185 H un's) State: ZIP:  et Location: Thiste un't zz cto z (185 H un's) State: ZIP:  et Location: Thiste un't zz cto z (185 H un's) State: ZIP:  et Location: Thiste un't zz cto z (185 H un's) State: ZIP:  et Location: Thiste un't zz cto z (185 H un's) State: ZIP:  et Location: Thiste un't zz cto z (185 H un's) State: ZIP:  et Location: Thiste un't zz cto z (185 H un's) State: ZIP:  et Location: Thiste un't zz cto z (185 H un's) State: ZIP:  et Location: Thiste un't zz cto z (185 H un's) State: ZIP:  et Location: Thiste un't zz cto z (185 H un's) State: ZIP:  et Location: Thiste un't zz cto z (185 H un's) State: ZIP:  et Location: Thiste un't zz cto z (185 H un's) State: ZIP:  et Location: Thiste un't zz cto z (185 H un's) State: ZIP:  et Location: Thiste un't zz cto z (185 H un's) State: ZIP:  et Location: Thiste un't zz cto z (185 H un's) State: ZIP:  et Location: Thiste un't zz cto z (185 H un's) State: ZIP:  et Location: Thiste un't zz cto z (185 H un's) State: ZIP:  et Location: Thiste un't zz cto z (185 H un's) State: ZIP:  et Location: Thiste un't z cto z (185 H un's) State: ZIP:  et Location: Thiste un't z cto z (185 H un's) State: ZIP:  et Location: Thiste un't z cto z (185 H un's) State: ZIP:  et Location: Thiste un't z cto z (185 H un's) State: ZIP:  et Location: Thiste un't z cto z (185 H un's) State: ZIP:  et Location: Thiste un't z cto z (185 H un's) State: ZIP:  et Location: Thiste un't z cto z (185 H un's) State: ZIP:  et Location: Thiste un't z cto z (185 H un's) State: ZIP:  et Location: Thiste un't z cto z (185 H un's) State: ZIP:  et Location: Thiste un't z cto z (185 H un's) State: ZIP:  et Location: Thiste un't z cto z (185 H |       | 1:14                   | 12.41.6                                                                                                                            | 7                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 3.6                                                                                                                                                                                                                 | W                         |
| ANALYSIS  TO 3 East Clinton, PO Box 1613  Bess: 703 East Clinton, PO Box 1613  Hobbs  State: NM Zip: 88240  Attn:  ##: 575 397-0510  Fax #: 575 393-4388  Address:  ct Name: Thistee Unit 2z CTD Z (195 H vnis) State: Zip:  ##: 10cation: Thistee Unit 2z CTD Z (195 H vnis) State: Zip:  ##: 10cation: Thistee Unit 2z CTD Z (195 H vnis) State: Zip:  ##: 10cation: Thistee Unit 2z CTD Z (195 H vnis) State: Zip:  ##: 10cation: Thistee Unit 2z CTD Z (195 H vnis) State: Zip:  ##: 10cation: Thistee Unit 2z CTD Z (195 H vnis) State: Zip:  ##: 10cation: Thistee Unit 2z CTD Z (195 H vnis) State: Zip:  ##: 10cation: Thistee Unit 2z CTD Z (195 H vnis) State: Zip:  ##: 10cation: Thistee Unit 2z CTD Z (195 H vnis) State: Zip:  ##: 10cation: Thistee Unit 2z CTD Z (195 H vnis) State: Zip:  ##: 10cation: Thistee Unit 2z CTD Z (195 H vnis) State: Zip:  ##: 10cation: Thistee Unit 2z CTD Z (195 H vnis) State: Zip:  ##: 10cation: Thistee Unit 2z CTD Z (195 H vnis) State: Zip:  ##: 10cation: Thistee Unit 2z CTD Z (195 H vnis) State: Zip:  ##: 10cation: Thistee Unit 2z CTD Z (195 H vnis) State: Zip:  ##: 10cation: Thistee Unit 2z CTD Z (195 H vnis) State: Zip:  ##: 10cation: Thistee Unit 2z CTD Z (195 H vnis) State: Zip:  ##: 10cation: Thistee Unit 2z CTD Z (195 H vnis) State: Zip:  ##: 10cation: Thistee Unit 2z CTD Z (195 H vnis) State: Zip:  ##: 10cation: Thistee Unit 2z CTD Z (195 H vnis) State: Zip:  ##: 10cation: Thistee Unit 2z CTD Z (195 H vnis) State: Zip:  ##: 10cation: Thistee Unit 2z CTD Z (195 H vnis) State: Zip:  ##: 10cation: Thistee Unit 2z CTD Z (195 H vnis) State: Zip:  ##: 10cation: Thistee Unit 2z CTD Z (195 H vnis) State: Zip:  ##: 10cation: Thistee Unit 2z CTD Z (195 H vnis) State: Zip:  ##: 10cation: Thistee Unit 2z CTD Z (195 H vnis) State: Zip:  ##: 10cation: Thistee Unit 2z CTD Z (195 H vnis) State: Zip:  ##: 10cation: Thistee Unit 2z CTD Z (195 H vnis) State: Zip:  ##: 10cation: Thistee Unit 2z CTD Z (195 H vnis) State: Zip:  ##: 10cation: Thistee Unit 2z CTD Z (195 H vnis) State: Zip:  ##: 10cation: Thistee Unit  |       | 1:15                   | 1                                                                                                                                  | 12                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                     | 2                         |
| ANALYSIS  ct Manager: Armando Aguirre  ess: 703 East Clinton, PO Box 1813  Hobbs  State: NM ZIp: 88240  Attn:  e#: 575 397-0510  Fax #: 575 393-4388  ct Name: Thistle unit 22 CTD 2 (185 Hunis) State: Zip:  ct Name: Thistle unit 22 CTD 2 (185 Hunis) State: Zip:  ct Location: Thistle unit 22 CTD 2 (185 Hunis) State: Zip:  ct Location: Thistle unit 22 CTD 2 (185 Hunis) State: Zip:  ct Name: Cmmu 7 120mb  MATRIX PRESERV, SAMPLING  B                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |       | ×                      | 7-14-8                                                                                                                             | 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 4-1-6                                                                                                                                                                                                               | 4                         |
| ANALYSIS  CT Manager: Armando Aguirre  Ess: 703 East Clinton, PO Box 1813  Hobbs  State: NM Zip: 88240  Et : 575 397-0510  Fax #: 575 393-4388  City:  Ct Name: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Location: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Location: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Location: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Location: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Location: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Location: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Location: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Location: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Location: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Location: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Location: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Location: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Location: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Location: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Location: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Location: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Location: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Location: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Location: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Location: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Location: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Location: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Location: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Location: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Location: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Location: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Location: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Location: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Location: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Location: Thistee Unit 22 CTD 2 (185 H unit) State: Zip:  Ct Locat |       | BTEX                   | ACID/BASE:<br>ICE / COOL<br>OTHER:                                                                                                 | # CONTAINERS GROUNDWATER WASTEWATER SOIL OIL SLUDGE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Sample I.D.                                                                                                                                                                                                         | Lab I.D.                  |
| ANALYSIS  CT Manager: Armando Aguirre  ess: 703 East Clinton, PO Box 1813  Hobbs  State: NM Zip: 88240  e#: 575 397-0510  Fax#: 575 393-4388  ct #: DEV-Z5-O16  Project Owner:  ct Name: Thistle Unit 22 CTB 2 (185 Hunis) State: Zip:  ct Location: Thistle Unit 22 CTB 2 (185 Hunis) Ethons #:  lier Name: Emmu J Rome  Fax #:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |       | G                      | $\neg \vdash$                                                                                                                      | T                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                     | FOR LAB USE ONLY          |
| ANALYSIS  CT Manager: Armando Aguirre  Ess: 703 East Clinton, PO Box 1813  Hobbs  State: NM Zip: 88240  Et#: 575 397-0510  Fax#: 576 393-4388  Ct WarmerThistle Unit 22 CTD 2 (185 Hunit) State: Zip:  Ct NamerThistle Unit 22 CTD 2 (185 Hunit) State: Zip:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |       |                        | ax #:                                                                                                                              | 71                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | EMME J 12                                                                                                                                                                                                           | Sampler Name              |
| ANALYSIS  CT Manager: Armando Aguirre  Ess: 703 East Clinton, PO Box 1813  Hobbs  State: NM Zip: 88240  ett: 575 397-0510  Fax #: 575 393-4388  City:  Ct #: DEV-25-016  Project Owner:  Ct Name: Thiste unif 22 CTD 2 (185 Hunif) State: Zip:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |       |                        | hone #:                                                                                                                            | ~                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Thistle Unit 22                                                                                                                                                                                                     | Project Location          |
| ANALYSIS  CT Manager: Armando Aguirre  Ess: 703 East Clinton, PO Box 1813  Hobbs  State: NM Zip: 88240  ##: 575 397-0510  Fax #: 575 393-4388  ANALYSIS  ANALYSIS  Company: DEV on Every  ANALYSIS  ANALYSIS  ANALYSIS  ANALYSIS  Company: DEV on Every  ANALYSIS  ANALYSIS  Company: DEV on Every  Cit #: DEV - 25 - 016  Project Owner:  City:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |       |                        |                                                                                                                                    | 2 (185 HUMIA) 5                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | un:+ 22                                                                                                                                                                                                             | Project Name?             |
| ANALYSIS  ct Manager: Armando Aguirre  ess: 703 East Clinton, PO Box 1813  State: NM Zip: 88240  ANALYSIS  Company: DEVON Brown  ANALYSIS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |       |                        | ilty:                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 910                                                                                                                                                                                                                 | 1. 4                      |
| ANALYSIS  Ct Manager: Armando Aguirre  Ess: 703 East Clinton, PO Box 1813  Hobbs State: NM Zip: 88240  ANALYSIS  Company: DEV on Breed                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |       |                        | ddress:                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Fax#:                                                                                                                                                                                                               |                           |
| Armando Aguirre P.o. #: 2/63/64 3/5 East Clinton, PO Box 1813 Company: DEV on Brug                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |       |                        |                                                                                                                                    | 88240                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | State: NM                                                                                                                                                                                                           |                           |
| Armando Aguirre P.o. #: 2/6 3/64/3/5                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |       | Every                  |                                                                                                                                    | 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 703 East Clinton, PO Box 1813                                                                                                                                                                                       |                           |
| Spring and Environmental Solutions R B/17. TO ANALYSIS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | - 1   |                        |                                                                                                                                    | 10                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                     | Project Manag             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | - 1   |                        | N.B.                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 1                                                                                                                                                                                                                   | County County             |

CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

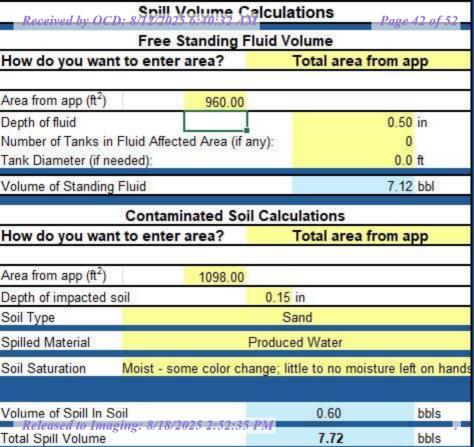


# CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

101 East Marland, Hobbs, NM 88240 (675) 383-2326 FAX (676) 883-2476

|                                | om  | eromo@sesi-nm.com<br>srodriguez@sesi-nm.com | @sesi         | guez       | eromo@sesi-nm.com<br>srodriguez@sesi-nm.               | Ib BY:                                                          | (Initials)     |                      | Sample Condition Cool Intact Yes Yes | Yes in                      | 1028         |                                   | #140 -3-                                                       | 1               | Sampler - UPS - Bus - Other: 5 72                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | S - Bus                                    | mpler - UF        |
|--------------------------------|-----|---------------------------------------------|---------------|------------|--------------------------------------------------------|-----------------------------------------------------------------|----------------|----------------------|--------------------------------------|-----------------------------|--------------|-----------------------------------|----------------------------------------------------------------|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|-------------------|
|                                | 3 - | sbabb@sesi-nm.com<br>kywatson@sesi-nm.com   | i-nm<br>sesi- | )@ses      | sbabb@sesi-nm.com<br>kywatson@sesi-nm.c                |                                                                 |                |                      |                                      | *                           | Received By: | ecelv                             | 7                                                              | Date:           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | dy:                                        | Kelinguished by:  |
|                                |     | aaguirre@sesi-nm com                        | eci-n         | S:         | REMARKS:                                               |                                                                 |                |                      | 6                                    | 2                           | De           | 0                                 |                                                                | 17758           | 672                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Villegerz                                  | THICK             |
| Add'l Phone #:<br>Add'l Fax #: |     | O No                                        | ☐ Yes         | tr sult:   | Phone Result:                                          | 17-                                                             |                |                      |                                      | Y.                          | Received By: | ecelv                             | Se                                                             | 10ate:          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | by:                                        | Kellinquished by: |
|                                |     |                                             | *             | he applica | completion of t<br>ent, its subsidia<br>ons or otherwi | thin 50 days after<br>fits incurred by cli<br>sbore sisted ress | or loss of pro | received to          | ruptions, k                          | iness inter-<br>the ther su | d union      | MEANING THE                       | ever shall be deer<br>ges, including will<br>assund the G'ital | equantel dame   | anaytes. Al daims including those for negligence and eny other cause whatesever shall be doeded maked unless made in writing and received by Christian which 30 days after completion of the applicable service. In no event shall Cardinal be stable for incidental or consequential damages, incideling without similation, business interruptions, loss of use, or loss of profits incurred by clean, his subsidialized, assectioned analysis and of the above affects after response or otherwise. | at Cardinal be Pat<br>attains out of or to | o. In no event sh |
|                                | 1   | 1                                           |               | The T      | by the client is                                       | the amount paid                                                 | be imiled to   | or lort, she         | Contract                             | or bossed b                 | mothy B.     | sim erisi                         | femedy lot any c                                               | Rent a exclusiv | PLEASE NOTE: Usbidy and Demogras. Continut à Esbilly and disnit à exclusive formedy for any claim ething whicher based in contract or left, think be intitled to the amount paid by the dient by the                                                                                                                                                                                                                                                                                                   | ly and Damagos.                            | SE NOTE: LIGHT    |
|                                | H   |                                             |               |            |                                                        |                                                                 |                |                      |                                      |                             | $\Box$       | -                                 |                                                                |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                            |                   |
|                                |     | X,                                          | ×             | X          | 5:47                                                   | 7-14-25 2:47                                                    | ×              | -                    | -                                    | ×                           |              | 1                                 | 6                                                              |                 | +P-5-85                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | HP                                         | 4                 |
|                                |     | K,                                          | *             | X          | 2:39                                                   | 7-14-25 2:39                                                    | *              | -                    |                                      | ×                           |              | 5                                 | 6                                                              |                 | HP-4-55                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | TY                                         | 18                |
|                                |     | Κ.                                          | ×             | X          | 25.5                                                   | 55:252-HI-E                                                     | ×              | _                    |                                      | ~                           |              | 37                                | -                                                              |                 | 1-3-55                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | HP-                                        | 7                 |
|                                |     | X                                           | ×             | X          | 2:36                                                   | 7-14-25 2:30                                                    | ×              |                      |                                      | ×                           |              | 72                                | 2                                                              |                 | - 2-6"                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | -4H                                        | 2                 |
|                                |     | X                                           | *             | ×          | 24.1                                                   | 24:12-11-4                                                      | ~              | _                    |                                      | ×                           |              | 5                                 | _                                                              |                 | 2-1-611                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | HP-                                        | U                 |
|                                |     | X                                           | ×             | X          | -                                                      | x-1-4                                                           | ×              |                      |                                      | 8                           |              | 2                                 | 2                                                              |                 | - 12                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | AH                                         | 2                 |
|                                |     | ×                                           | ×             | ×          | 48:1                                                   | るった                                                             |                | H                    |                                      | ×                           |              | 4                                 | 5                                                              |                 | 11-6                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | AH.                                        | 1                 |
|                                |     | CL                                          | TPI+          | BTEX       | TIME                                                   | DATE                                                            | OTHER:         | ÖTHER:<br>ACID/BASE: | OIL                                  | WASTEWATER<br>SOIL          | GROUNDWATER  | (G)RAB OR (C)OMP.<br># CONTAINERS | -                                                              | 5               | Sample I.D.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <u> </u>                                   | Lab I.D.          |
|                                |     |                                             |               | -          | 4G                                                     | SAMPLING                                                        | PRESERV        | PR                   | RIX                                  | MATRIX                      | T            | -                                 |                                                                |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | -                                          | FOR LAB USE ONLY  |
|                                |     |                                             |               | _          |                                                        |                                                                 |                | Fax#:                |                                      | Principle of the last       | 1            |                                   | no                                                             | Romo            | Commer 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 1                                          | Sampler Name:     |
|                                |     |                                             |               |            |                                                        |                                                                 | #              | 185 H UNI) Phone #:  | (4,20                                | 7                           | 5            |                                   | C48 2                                                          | 7 22            | さん しかか                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Project Location: This He                  | oject Loca        |
|                                |     |                                             |               |            |                                                        | Zip:                                                            |                | State:               | けいがも                                 |                             | 37           | _                                 | CTB 2                                                          | 22              | He UNST                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Project Name This He                       | ject Nam          |
|                                |     |                                             |               | _          |                                                        |                                                                 |                | City:                |                                      |                             |              |                                   | Project Owner:                                                 | Proje           | 2-01%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Project #: DEV- 25-                        | oject #: D        |
|                                |     |                                             |               |            |                                                        |                                                                 | :88            | Address:             |                                      |                             | 88           | 3-43                              | 575 393-4388                                                   | Fax#:           | 0510                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 575 397-0510                               | Phone #:          |
|                                |     |                                             |               | -          | 7                                                      |                                                                 |                | Attn:                |                                      | 0                           | 88240        | Zlp: 8                            | State: NM 2                                                    | State           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Hobbs                                      | City:             |
|                                | _   |                                             |               |            | Energy                                                 | Evan 6                                                          | Company: PEvon | Comp                 |                                      |                             |              |                                   | 1613                                                           | ОВох            | 703 East Clinton, PO Box 1613                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 703 Eas                                    | Address:          |
| - 1                            | -   |                                             |               | 1          | -                                                      | P.O. # 21 (384 36                                               | 312            | P.O. 1               |                                      |                             |              |                                   |                                                                | re              | Armando Aguirre                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ger: Arn                                   | Project Manager:  |
| ANALYSIS REQUEST               | ANA |                                             |               | essi.      |                                                        | 07 7/18                                                         | 組織             |                      |                                      |                             | S            | TIO                               | ental Sol                                                      | MEDIA           | Safety and Environmental Solutions                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 1                                          | Company Name:     |

Page 21 of 21



| Person Reporting  Received by OCD:        | ARC<br>8/12/2025 6:40 | CHIE DUARTE<br>RAMASTORage 43 of 52                 |
|-------------------------------------------|-----------------------|-----------------------------------------------------|
| Facility or Well Name                     | TH                    | IISTLE 185H                                         |
| API (If applicable)<br>Lat/Long<br>M3#    | LAT N 32' 17' 43.1    | 8" LONG W 103' 33' 16.52"                           |
| Please Include the following with report: |                       | Sign - Pictures of Spill -<br>f Volume Calculations |
| Date and Time of Incident                 | 7-9                   | -25 7:30AM                                          |
| Description of Incident                   | leak on 3-ph          | ase water dump spool                                |
| Immediate Actions                         | islolate              | and shut in well                                    |
| <u>4</u>                                  | Released (Bbls)       | Recovered (Bbls)                                    |
| Fluid Type                                |                       |                                                     |
| Oil                                       |                       |                                                     |
| Produced Water                            | 7.72                  | 7                                                   |
| Gas                                       | 33                    | 8                                                   |
| Dih Released to Imagin                    | ng: 8/18/2025 2:52    | :35 PM                                              |

Searches Operator Data Hearing Fee Application

> Quick Links General Incident Information

• New Facility Search New Incident Search New Operator Search 
 • New Pit Search New Spill Search ♥ • New Tank Search New Well Search ♥

 Materials • Events • Orders Action Status Associated Images • Facility Files (50) Incident Files (2)

### **OCD Permitting**

Home Searches Incidents

Date

07/16/2025

07/16/2025

### NAPP2519126637 THISTLE UNIT 22 CTB 2 @ 0

| General Incident I            | Informatio                             | on —               |                         |                  |                    |                        |                           |                           |            |
|-------------------------------|----------------------------------------|--------------------|-------------------------|------------------|--------------------|------------------------|---------------------------|---------------------------|------------|
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
| Site Name:                    | THISTLE                                | UNIT 22 CTB        | 2                       |                  |                    |                        |                           |                           |            |
| Well:                         |                                        |                    |                         |                  |                    |                        |                           |                           |            |
| Facility:                     | [fAPP21                                | 23650155] THIS     | TLE UNIT                | 22 CTB 2         |                    |                        |                           |                           |            |
| Operator:                     | [ <u>6137</u> ] D                      | EVON ENERGY        | PRODUC                  | TION COMPAN      | /, LP              |                        |                           |                           |            |
| Status:                       | Initial C-                             | 141 Approved, F    | ending sub              | mission of Site  | Characterization / | Remediation Plan       | OR Remediation Closure    | Report from the operator  |            |
| Type:                         | Produced Water Release Severity: Minor |                    |                         |                  |                    |                        |                           |                           |            |
|                               |                                        |                    |                         |                  |                    |                        | Surface Owner:            | State                     |            |
| District:                     | Hobbs                                  |                    |                         |                  |                    |                        | County:                   | Lea (25)                  |            |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
| Incident Location:            | A-22-23                                | S-33E 438 FI       | NL 734 F                | EL               |                    |                        |                           |                           |            |
| Lat/Long:                     |                                        | 36,-103.554495     |                         |                  |                    |                        |                           |                           |            |
| Directions:                   |                                        |                    |                         |                  |                    |                        |                           |                           |            |
| Directions.                   |                                        |                    |                         |                  |                    |                        |                           |                           |            |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
| Notes                         |                                        |                    |                         |                  |                    |                        |                           |                           |            |
| Source of Referral:           | Industry                               | Rep                |                         |                  |                    |                        | Action / Escalation:      |                           |            |
|                               | ,                                      |                    |                         |                  |                    |                        |                           |                           |            |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
| Resulted In Fire:             |                                        |                    |                         |                  |                    |                        | Resulted In Injury:       |                           |            |
| Endangered Public I           | lealth:                                |                    |                         |                  |                    |                        | Will or Has Reached       | Natercourse:              |            |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
| Fresh Water Contam            | ination:                               |                    |                         |                  |                    |                        | Property Or Environn      | nental Damage:            |            |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
| Contact Details               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
| Contact Details               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
| Contact Name:                 |                                        |                    |                         |                  |                    |                        | Contact Title:            |                           |            |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
| Event Dates                   |                                        |                    |                         |                  |                    |                        |                           |                           |            |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
| Date of Discovery: 07/09/2025 |                                        |                    |                         |                  |                    | Initial C-141 Report D | ue:                       | 7/24/2025                 |            |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
|                               |                                        |                    |                         |                  |                    |                        | Remediation Closure       | Report Due:               | 10/07/2025 |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
| Incident Dates                |                                        |                    |                         |                  |                    |                        |                           |                           |            |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
| Type                          | Action                                 | Received           | Denied                  | Approved         |                    |                        |                           |                           |            |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
| Initial C-141 Report          | [484802]                               | 07/15/2025         |                         | 07/16/2025       |                    |                        |                           |                           |            |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
| Notification                  | [483518]                               | 07/10/2025         |                         | 07/10/2025       |                    |                        |                           |                           |            |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
| Compositional Ar              | nalysis of                             | Vented and/o       | or Flared               | Natural Gas      |                    |                        |                           |                           |            |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
| No Compositional Analy        | sis Found                              |                    |                         |                  |                    |                        |                           |                           |            |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
| Incident Materials            |                                        |                    |                         |                  |                    |                        |                           |                           |            |
| IIICIGEI IL IVIALEI IAIS      | ,                                      |                    |                         |                  |                    |                        |                           |                           |            |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
|                               |                                        |                    |                         |                  |                    |                        | Volume                    |                           |            |
| Counc                         |                                        | 80                 |                         | Material         |                    |                        | voidille                  | Units                     |            |
| Cause                         |                                        | Source             |                         | material         | Unk.               | Released               | Recovered                 | Lost                      |            |
|                               |                                        |                    |                         |                  | UIIK.              | released               | Vecoveten                 | LUST                      |            |
| Equipment Failure             | Ι.                                     | Dump Line          | Drod.                   | iced Water       |                    | 8                      | 7                         | 1 BBL                     |            |
| Edarbinetir t, stinie         | '                                      | Samp Line          | FIOUL                   | react            |                    |                        | ,                         | DDL                       |            |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
| The concentration of o        | dissolved of                           | loride in the n    | duced water             | r >10 000 ma/l-  | Yes                | No                     |                           |                           |            |
| me concentration of 0         | uissoiveu CII                          | noriue in the pro  | uuo <del>c</del> u Wale | 10,000 IIIg/I:   | Tes                | NO                     |                           |                           |            |
| Course of Palaner OF          | Additional                             | Dotoile recoid - d | for meter!              | le releaced:     |                    |                        |                           |                           |            |
| Cause of Release OR           |                                        |                    |                         |                  | ananatan didiri    | roy 7 bble             | al d bbl book - t - t t   | face by leaking form      |            |
| Leak on 3-phase s             | seperator du                           | imp spool allow    | au Tiulds to            | ue released to s | eperator skid, app | IUX / DDIS recovere    | d, 1 bbl impacted pad sur | iace by leaking from skid | -          |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
| Incident Events               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |
|                               |                                        |                    |                         |                  |                    |                        |                           |                           |            |

Detail

An application [484802] was submitted to OCD for review. It was submitted, indicating that it was an: [C-141] Application for administrative approval of a release notification and

The (07/16/2025, C-141) application [484802] was accepted by OCD. The operator was emailed with details of this event.

corrective action The operator was emailed confirmation of this event. Released to Imaging: 8/18/2025 2:52:35 PM

Hearing Fee Application

Searches

Operator Data

| 07/10/2025                                                                                                          | New incident created by the operator, upon the submiss      | sion of notification of release.              |        |  |  |  |
|---------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|-----------------------------------------------|--------|--|--|--|
| 07/09/2025                                                                                                          | Release discovered by the operator.                         |                                               |        |  |  |  |
| Incident Se                                                                                                         | verity                                                      |                                               |        |  |  |  |
|                                                                                                                     |                                                             |                                               |        |  |  |  |
|                                                                                                                     | s defined by 19.15.29.7(A) NMAC?                            |                                               |        |  |  |  |
| Yes Yes                                                                                                             | No                                                          |                                               |        |  |  |  |
| Incident Co                                                                                                         | prective Actions                                            |                                               |        |  |  |  |
|                                                                                                                     |                                                             | In Wal Decrease                               |        |  |  |  |
| Initial Response                                                                                                    |                                                             |                                               |        |  |  |  |
| The source of the release has been stopped.                                                                         |                                                             |                                               |        |  |  |  |
| The impacted area has been secured to protect human health and the environment.                                     |                                                             |                                               |        |  |  |  |
| Released materials have been contained via the use of berms or dikes, absorbent pads, or other containment devices. |                                                             |                                               |        |  |  |  |
| All free liquids and recoverable materials have been removed and managed appropriately.                             |                                                             |                                               |        |  |  |  |
| f all the actions                                                                                                   | described above have <u>not</u> been undertaken, explain wh | <i>κ</i>                                      |        |  |  |  |
|                                                                                                                     |                                                             |                                               |        |  |  |  |
| lo site characte                                                                                                    | erization data was found for this incident.                 |                                               |        |  |  |  |
|                                                                                                                     |                                                             | Remediation Plan                              |        |  |  |  |
| Have the latera                                                                                                     | I and vertical extents of contamination been fully delineat | ed?                                           | Yes No |  |  |  |
|                                                                                                                     |                                                             |                                               |        |  |  |  |
|                                                                                                                     | tted date will the remediation commence?                    |                                               |        |  |  |  |
| On what date w                                                                                                      | rill (or did) the final sampling occur?                     |                                               |        |  |  |  |
| On what date w                                                                                                      | rill (or was) the remediation complete(d)                   |                                               |        |  |  |  |
| Release is indic                                                                                                    | ated as not yet fully delineated. Any Deferral Requests re  | sceived may not be granted for this incident. |        |  |  |  |
| lo remediation                                                                                                      | closure report data was found for this incident.            |                                               |        |  |  |  |
| lo reclamation                                                                                                      | report data was found for this incident.                    |                                               |        |  |  |  |
| lo re-vegetation                                                                                                    | n report data was found for this incident.                  |                                               |        |  |  |  |
| 01                                                                                                                  |                                                             |                                               |        |  |  |  |
| Orders                                                                                                              |                                                             |                                               |        |  |  |  |

New Mexico Energy, Minerals and Natural Resources Department | Copyright 2012 1220 South St. Francis Drive | Santa Fe, NM 87505 | P: (505) 476-3200 | F: (505) 476-3220

EMNRD Home OCD Main Page OCD Rules Help

No Orders Found

Sante Fe Main Office Phone: (505) 476-3441 General Information

Phone: (505) 629-6116
Online Phone Directory
https://www.emnrd.nm.gov/ocd/contact-us

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

QUESTIONS

Action 494576

### **QUESTIONS**

| Operator:                           | OGRID:                                                   |
|-------------------------------------|----------------------------------------------------------|
| DEVON ENERGY PRODUCTION COMPANY, LP | 6137                                                     |
| 333 West Sheridan Ave.              | Action Number:                                           |
| Oklahoma City, OK 73102             | 494576                                                   |
|                                     | Action Type:                                             |
|                                     | [C-141] Site Char./Remediation Plan C-141 (C-141-v-Plan) |

### QUESTIONS

| Prerequisites     |                                          |
|-------------------|------------------------------------------|
| Incident ID (n#)  | nAPP2519126637                           |
| Incident Name     | NAPP2519126637 THISTLE UNIT 22 CTB 2 @ 0 |
| Incident Type     | Produced Water Release                   |
| Incident Status   | Remediation Plan Received                |
| Incident Facility | [fAPP2123650155] THISTLE UNIT 22 CTB 2   |

| Location of Release Source                     |                       |
|------------------------------------------------|-----------------------|
| Please answer all the questions in this group. |                       |
| Site Name                                      | THISTLE UNIT 22 CTB 2 |
| Date Release Discovered                        | 07/09/2025            |
| Surface Owner                                  | State                 |

| Incident Details                                                                                     |                        |
|------------------------------------------------------------------------------------------------------|------------------------|
| Please answer all the questions in this group.                                                       |                        |
| Incident Type                                                                                        | Produced Water Release |
| Did this release result in a fire or is the result of a fire                                         | No                     |
| Did this release result in any injuries                                                              | No                     |
| Has this release reached or does it have a reasonable probability of reaching a watercourse          | No                     |
| Has this release endangered or does it have a reasonable probability of endangering public health    | No                     |
| Has this release substantially damaged or will it substantially damage property or the environment   | No                     |
| Is this release of a volume that is or may with reasonable probability be detrimental to fresh water | No                     |

| Nature and Volume of Release                                                                                                                         |                                                                                                                                                                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Material(s) released, please answer all that apply below. Any calculations or specific justifications for                                            | or the volumes provided should be attached to the follow-up C-141 submission.                                                                                   |
| Crude Oil Released (bbls) Details                                                                                                                    | Not answered.                                                                                                                                                   |
| Produced Water Released (bbls) Details                                                                                                               | Cause: Equipment Failure   Dump Line   Produced Water   Released: 8 BBL   Recovered: 7 BBL   Lost: 1 BBL.                                                       |
| Is the concentration of chloride in the produced water >10,000 mg/l                                                                                  | Yes                                                                                                                                                             |
| Condensate Released (bbls) Details                                                                                                                   | Not answered.                                                                                                                                                   |
| Natural Gas Vented (Mcf) Details                                                                                                                     | Not answered.                                                                                                                                                   |
| Natural Gas Flared (Mcf) Details                                                                                                                     | Not answered.                                                                                                                                                   |
| Other Released Details                                                                                                                               | Not answered.                                                                                                                                                   |
| Are there additional details for the questions above (i.e. any answer containing Other, Specify, Unknown, and/or Fire, or any negative lost amounts) | Leak on 3-phase seperator dump spool allowed fluids to be released to seperator skid, approx 7 bbls recovered, 1 bbl impacted pad surface by leaking from skid. |

General Information Phone: (505) 629-6116

Online Phone Directory https://www.emnrd.nm.gov/ocd/contact-us

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

QUESTIONS, Page 2

Action 494576

QUESTIONS (continued)

| QUESTI                                                                                                                                                                                | ions (continued)                                                                                                                                                                                                                                                                                                                                                                               |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Operator: DEVON ENERGY PRODUCTION COMPANY, LP                                                                                                                                         | OGRID:<br>6137                                                                                                                                                                                                                                                                                                                                                                                 |
| 333 West Sheridan Ave. Oklahoma City, OK 73102                                                                                                                                        | Action Number: 494576                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                                                                                       | Action Type:  [C-141] Site Char./Remediation Plan C-141 (C-141-v-Plan)                                                                                                                                                                                                                                                                                                                         |
| QUESTIONS                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                |
| Nature and Volume of Release (continued)                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                |
| Is this a gas only submission (i.e. only significant Mcf values reported)                                                                                                             | No, according to supplied volumes this does not appear to be a "gas only" report.                                                                                                                                                                                                                                                                                                              |
| Was this a major release as defined by Subsection A of 19.15.29.7 NMAC                                                                                                                | No                                                                                                                                                                                                                                                                                                                                                                                             |
| Reasons why this would be considered a submission for a notification of a major release                                                                                               | Unavailable.                                                                                                                                                                                                                                                                                                                                                                                   |
| With the implementation of the 19.15.27 NMAC (05/25/2021), venting and/or flaring of natural gas (i.                                                                                  | e. gas only) are to be submitted on the C-129 form.                                                                                                                                                                                                                                                                                                                                            |
| Initial Response                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                |
| The responsible party must undertake the following actions immediately unless they could create a s                                                                                   | safety hazard that would result in injury.                                                                                                                                                                                                                                                                                                                                                     |
| The source of the release has been stopped                                                                                                                                            | True                                                                                                                                                                                                                                                                                                                                                                                           |
| The impacted area has been secured to protect human health and the environment                                                                                                        | True                                                                                                                                                                                                                                                                                                                                                                                           |
| Released materials have been contained via the use of berms or dikes, absorbent pads, or other containment devices                                                                    | True                                                                                                                                                                                                                                                                                                                                                                                           |
| All free liquids and recoverable materials have been removed and managed appropriately                                                                                                | True                                                                                                                                                                                                                                                                                                                                                                                           |
| If all the actions described above have not been undertaken, explain why                                                                                                              | Not answered.                                                                                                                                                                                                                                                                                                                                                                                  |
|                                                                                                                                                                                       | iation immediately after discovery of a release. If remediation has begun, please prepare and attach a narrative<br>ted or if the release occurred within a lined containment area (see Subparagraph (a) of Paragraph (5) of<br>evaluation in the follow-up C-141 submission.                                                                                                                  |
| to report and/or file certain release notifications and perform corrective actions for releathe OCD does not relieve the operator of liability should their operations have failed to | knowledge and understand that pursuant to OCD rules and regulations all operators are required asses which may endanger public health or the environment. The acceptance of a C-141 report by adequately investigate and remediate contamination that pose a threat to groundwater, surface t does not relieve the operator of responsibility for compliance with any other federal, state, or |
| I hereby agree and sign off to the above statement                                                                                                                                    | Name: James Raley Title: EHS Professional Email: jim.raley@dvn.com Date: 08/12/2025                                                                                                                                                                                                                                                                                                            |

Sante Fe Main Office Phone: (505) 476-3441 General Information

Phone: (505) 629-6116

Online Phone Directory https://www.emnrd.nm.gov/ocd/contact-us

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

QUESTIONS, Page 3

Action 494576

### **QUESTIONS** (continued)

| Operator:                           | OGRID:                                                   |
|-------------------------------------|----------------------------------------------------------|
| DEVON ENERGY PRODUCTION COMPANY, LP | 6137                                                     |
| 333 West Sheridan Ave.              | Action Number:                                           |
| Oklahoma City, OK 73102             | 494576                                                   |
|                                     | Action Type:                                             |
|                                     | [C-141] Site Char./Remediation Plan C-141 (C-141-v-Plan) |

### QUESTIONS

| Site Characterization                                                                                                         |                                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|
| Please answer all the questions in this group (only required when seeking remediation plan approva<br>release discovery date. | l and beyond). This information must be provided to the appropriate district office no later than 90 days after the |
| What is the shallowest depth to groundwater beneath the area affected by the release in feet below ground surface (ft bgs)    | Between 51 and 75 (ft.)                                                                                             |
| What method was used to determine the depth to ground water                                                                   | NM OSE iWaters Database Search                                                                                      |
| Did this release impact groundwater or surface water                                                                          | No                                                                                                                  |
| What is the minimum distance, between the closest lateral extents of the release ar                                           | nd the following surface areas:                                                                                     |
| A continuously flowing watercourse or any other significant watercourse                                                       | Between ½ and 1 (mi.)                                                                                               |
| Any lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark)                                             | Between ½ and 1 (mi.)                                                                                               |
| An occupied permanent residence, school, hospital, institution, or church                                                     | Between 1 and 5 (mi.)                                                                                               |
| A spring or a private domestic fresh water well used by less than five households for domestic or stock watering purposes     | Between 1 and 5 (mi.)                                                                                               |
| Any other fresh water well or spring                                                                                          | Between 1 and 5 (mi.)                                                                                               |
| Incorporated municipal boundaries or a defined municipal fresh water well field                                               | Between 1 and 5 (mi.)                                                                                               |
| A wetland                                                                                                                     | Greater than 5 (mi.)                                                                                                |
| A subsurface mine                                                                                                             | Greater than 5 (mi.)                                                                                                |
| An (non-karst) unstable area                                                                                                  | Between 1 and 5 (mi.)                                                                                               |
| Categorize the risk of this well / site being in a karst geology                                                              | Low                                                                                                                 |
| A 100-year floodplain                                                                                                         | Between 1 and 5 (mi.)                                                                                               |
| Did the release impact areas not on an exploration, development, production, or storage site                                  | No                                                                                                                  |

| Remediation Plan                                                                                                                                                                                                                                                                                       |                                                                                                    |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|--|
| Please answer all the questions that apply or are indicated. This information must be provided to the appropriate district office no later than 90 days after the release discovery date.                                                                                                              |                                                                                                    |  |
| Requesting a remediation plan approval with this submission                                                                                                                                                                                                                                            | Yes                                                                                                |  |
| Attach a comprehensive report demonstrating the lateral and vertical extents of soil contamination as                                                                                                                                                                                                  | sociated with the release have been determined, pursuant to 19.15.29.11 NMAC and 19.15.29.13 NMAC. |  |
| Have the lateral and vertical extents of contamination been fully delineated                                                                                                                                                                                                                           | Yes                                                                                                |  |
| Was this release entirely contained within a lined containment area                                                                                                                                                                                                                                    | No                                                                                                 |  |
| Soil Contamination Sampling: (Provide the highest observable value for each, in millig                                                                                                                                                                                                                 | rams per kilograms.)                                                                               |  |
| Chloride (EPA 300.0 or SM4500 Cl B)                                                                                                                                                                                                                                                                    | 11300                                                                                              |  |
| TPH (GRO+DRO+MRO) (EPA SW-846 Method 8015M)                                                                                                                                                                                                                                                            | 0                                                                                                  |  |
| GRO+DRO (EPA SW-846 Method 8015M)                                                                                                                                                                                                                                                                      | 0                                                                                                  |  |
| BTEX (EPA SW-846 Method 8021B or 8260B)                                                                                                                                                                                                                                                                | 0                                                                                                  |  |
| Benzene (EPA SW-846 Method 8021B or 8260B)                                                                                                                                                                                                                                                             | 0                                                                                                  |  |
| Per Subsection B of 19.15.29.11 NMAC unless the site characterization report includes completed efforts at remediation, the report must include a proposed remediation plan in accordance with 19.15.29.12 NMAC which includes the anticipated timelines for beginning and completing the remediation. |                                                                                                    |  |
| On what estimated date will the remediation commence                                                                                                                                                                                                                                                   | 08/20/2025                                                                                         |  |
| On what date will (or did) the final sampling or liner inspection occur                                                                                                                                                                                                                                | 09/01/2025                                                                                         |  |
| On what date will (or was) the remediation complete(d)                                                                                                                                                                                                                                                 | 10/01/2025                                                                                         |  |
| What is the estimated surface area (in square feet) that will be reclaimed                                                                                                                                                                                                                             | 3923                                                                                               |  |
| What is the estimated volume (in cubic yards) that will be reclaimed                                                                                                                                                                                                                                   | 290                                                                                                |  |
| What is the estimated surface area (in square feet) that will be remediated                                                                                                                                                                                                                            | 3923                                                                                               |  |
| What is the estimated volume (in cubic yards) that will be remediated                                                                                                                                                                                                                                  | 290                                                                                                |  |
| These estimated dates and measurements are recognized to be the best guess or calculation at the time of submission and may (be) change(d) over time as more remediation efforts are completed.                                                                                                        |                                                                                                    |  |

The OCD recognizes that proposed remediation measures may have to be minimally adjusted in accordance with the physical realities encountered during remediation. If the responsible party has any need to

significantly deviate from the remediation plan proposed, then it should consult with the division to determine if another remediation plan submission is required.

Released to Imaging: 8/18/2025 2:52:35 PM

General Information Phone: (505) 629-6116

Online Phone Directory https://www.emnrd.nm.gov/ocd/contact-us

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

QUESTIONS, Page 4

Action 494576

**QUESTIONS** (continued)

| Operator:                           | OGRID:                                                   |
|-------------------------------------|----------------------------------------------------------|
| DEVON ENERGY PRODUCTION COMPANY, LP | 6137                                                     |
| 333 West Sheridan Ave.              | Action Number:                                           |
| Oklahoma City, OK 73102             | 494576                                                   |
|                                     | Action Type:                                             |
|                                     | [C-141] Site Char./Remediation Plan C-141 (C-141-v-Plan) |

### QUESTIONS

| Remediation Plan (continued)                                                                                                                                                              |                                                |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|--|
| Please answer all the questions that apply or are indicated. This information must be provided to the appropriate district office no later than 90 days after the release discovery date. |                                                |  |
| This remediation will (or is expected to) utilize the following processes to remediate / reduce contaminants:                                                                             |                                                |  |
| (Select all answers below that apply.)                                                                                                                                                    |                                                |  |
| (Ex Situ) Excavation and off-site disposal (i.e. dig and haul, hydrovac, etc.)                                                                                                            | Yes                                            |  |
| Which OCD approved facility will be used for off-site disposal                                                                                                                            | HALFWAY DISPOSAL AND LANDFILL [fEEM0112334510] |  |
| OR which OCD approved well (API) will be used for off-site disposal                                                                                                                       | Not answered.                                  |  |
| <b>OR</b> is the <b>off-site</b> disposal site, to be used, out-of-state                                                                                                                  | Not answered.                                  |  |
| <b>OR</b> is the <b>off-site</b> disposal site, to be used, an NMED facility                                                                                                              | Not answered.                                  |  |
| (Ex Situ) Excavation and on-site remediation (i.e. On-Site Land Farms)                                                                                                                    | Not answered.                                  |  |
| (In Situ) Soil Vapor Extraction                                                                                                                                                           | Not answered.                                  |  |
| (In Situ) Chemical processing (i.e. Soil Shredding, Potassium Permanganate, etc.)                                                                                                         | Not answered.                                  |  |
| (In Situ) Biological processing (i.e. Microbes / Fertilizer, etc.)                                                                                                                        | Not answered.                                  |  |
| (In Situ) Physical processing (i.e. Soil Washing, Gypsum, Disking, etc.)                                                                                                                  | Not answered.                                  |  |
| Ground Water Abatement pursuant to 19.15.30 NMAC                                                                                                                                          | Not answered.                                  |  |
| OTHER (Non-listed remedial process)                                                                                                                                                       | Not answered.                                  |  |

Per Subsection B of 19.15.29.11 NMAC unless the site characterization report includes completed efforts at remediation, the report must include a proposed remediation plan in accordance with 19.15.29.12 NMAC. which includes the anticipated timelines for beginning and completing the remediation.

I hereby certify that the information given above is true and complete to the best of my knowledge and understand that pursuant to OCD rules and regulations all operators are required to report and/or file certain release notifications and perform corrective actions for releases which may endanger public health or the environment. The acceptance of a C-141 report by the OCD does not relieve the operator of liability should their operations have failed to adequately investigate and remediate contamination that pose a threat to groundwater, surface water, human health or the environment. In addition, OCD acceptance of a C-141 report does not relieve the operator of responsibility for compliance with any other federal, state, or local laws and/or regulations.

Name: James Raley Title: EHS Professional I hereby agree and sign off to the above statement Email: jim.raley@dvn.com Date: 08/12/2025

The OCD recognizes that proposed remediation measures may have to be minimally adjusted in accordance with the physical realities encountered during remediation. If the responsible party has any need to

significantly deviate from the remediation plan proposed, then it should consult with the division to determine if another remediation plan submission is required.

General Information Phone: (505) 629-6116

Online Phone Directory https://www.emnrd.nm.gov/ocd/contact-us

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

QUESTIONS, Page 5

Action 494576

**QUESTIONS** (continued)

| Operator:                           | OGRID:                                                   |
|-------------------------------------|----------------------------------------------------------|
| DEVON ENERGY PRODUCTION COMPANY, LP | 6137                                                     |
| 333 West Sheridan Ave.              | Action Number:                                           |
| Oklahoma City, OK 73102             | 494576                                                   |
|                                     | Action Type:                                             |
|                                     | [C-141] Site Char./Remediation Plan C-141 (C-141-v-Plan) |

### QUESTIONS

| Deferral Requests Only                                                                                                                                                                         |    |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|
| Only answer the questions in this group if seeking a deferral upon approval this submission. Each of the following items must be confirmed as part of any request for deferral of remediation. |    |
| Requesting a deferral of the remediation closure due date with the approval of this submission                                                                                                 | No |

General Information Phone: (505) 629-6116

Online Phone Directory https://www.emnrd.nm.gov/ocd/contact-us

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

QUESTIONS, Page 6

Action 494576

**QUESTIONS** (continued)

| Operator:                                                                                              | OGRID:                                                   |  |
|--------------------------------------------------------------------------------------------------------|----------------------------------------------------------|--|
| DEVON ENERGY PRODUCTION COMPANY, LP                                                                    | 6137                                                     |  |
| 333 West Sheridan Ave.                                                                                 | Action Number:                                           |  |
| Oklahoma City, OK 73102                                                                                | 494576                                                   |  |
|                                                                                                        | Action Type:                                             |  |
|                                                                                                        | [C-141] Site Char./Remediation Plan C-141 (C-141-v-Plan) |  |
| QUESTIONS                                                                                              |                                                          |  |
| Sampling Event Information                                                                             |                                                          |  |
| Last sampling notification (C-141N) recorded                                                           | {Unavailable.}                                           |  |
|                                                                                                        |                                                          |  |
| Remediation Closure Request                                                                            |                                                          |  |
| Only answer the questions in this group if seeking remediation closure for this release because all re | emediation steps have been completed.                    |  |
| Requesting a remediation closure approval with this submission                                         | No                                                       |  |

General Information Phone: (505) 629-6116

Online Phone Directory https://www.emnrd.nm.gov/ocd/contact-us

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

CONDITIONS

Action 494576

### **CONDITIONS**

| Operator:                           | OGRID:                                                   |
|-------------------------------------|----------------------------------------------------------|
| DEVON ENERGY PRODUCTION COMPANY, LP | 6137                                                     |
| 333 West Sheridan Ave.              | Action Number:                                           |
| Oklahoma City, OK 73102             | 494576                                                   |
|                                     | Action Type:                                             |
|                                     | [C-141] Site Char./Remediation Plan C-141 (C-141-v-Plan) |

### CONDITIONS

| Created By       | Condition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Condition<br>Date |
|------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|
| michael.buchanan | The Site Characterization and Assessment Plan is approved with the following conditions: The OCD notes that AH-2 @ 6", AH-5 @ 6", AH-7 @ 6" and AH-9 @ 6" have not been fully delineated vertically and still exceed the Table 1 standards for chloride in 19.15.29 NMAC. These must be addressed while excavation activities are taking place. A deferral for leaving on-pad contamination in place cannot be approved until delineation has been clearly defined both horizontally as well as vertically below each delineation sample point. Only when specific sampling points have been fully delineated can a deferral request be considered. | 8/18/2025         |
| michael.buchanan | The OCD notes that south of the tank battery on-site there appears to be discoloration or surface staining. Please explain what this is and if it is part of the release.                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 8/18/2025         |