HOBBS OCD

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RECEIVED

<u>District 1</u>
1625 N. French Dr., Hobbs, NM 88240
<u>District II</u>
1301 W. Grand Avenue, Artesia, NM 88210

State of New Mexico Energy Minerals and Natural Resources

Form C-141 Revised October 10, 2003

| District III 1000 Rio Brazos Road, Aztec, NM 87410 District IV | | | | Oil Conservation Division 1220 South St. Francis Dr. | | | | Submit 2 Copies to appropriate District Office in accordance with Rule 116 on back | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|----------------------------------------------------|--------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|----------------------------------------------------------------------------------------|-----------------------------------------------------------------|------------------------------------------------------------------------------------------|------------------------------------|-------------------------------------------------------------|----------------------------------------------|--|--|
| 1220 S. St. Fran | District IV 1 1220 S. St. Francis Dr., Santa Fe, NM 87505 | | | | | anta Fe, NM 87505 | | | | side of form | | | |
| Release Notification and Corrective Action | | | | | | | | | | | | | |
| , . | | | | | | OPERAT | | \boxtimes | Initia | al Report | Final Report | | |
| Name of Co | | | | | | ony Aguilar | | | ··· | | | | |
| | | nolind Road Hobbs Unit | | | Telephone No. 575-390-6312 Facility Type: Well Location | | | | | | | | |
| | | | | | | pe. wen zwen | | | | | | | |
| Surface Ow | ner: DCP | Midstream | | Mineral C | | | | | | | 92 | | |
| Unit Letter Section Township Range Feet from the North/South Line Feet from the East/West Line County | | | | | | | | | | | | | |
| C C | Section 4 | 19S | 38E | rees nom me | Norus. | Soun Line | Feet Bons and | EBSI: WESI | Line | County | | | |
| Latitude: <u>32.693470</u> Longitude: <u>-103,153740</u> | | | | | | | | | | | | | |
| NATURE OF RELEASE | | | | | | | | | | | | | |
| Type of Rele Produced Wa | ase: ster and Oil | i | | | | Volume of Release: 1BBL Oil, 500 BBLS Water | | | Volume Recovered: 50 BBLS Water | | | | |
| Source of Release: | | | | | | Date and Hour of Occurrence: | | | Date and Hour of Discovery | | | | |
| Wellhead | . 35-41 6 | C`0 | | | | | 8/17/2014 10:37:49 AM 8/17/2014 10: 30 AM If YES, To Whom? | | | | | | |
| Was Immedi | ate Notice v | | Yes [|] No ☐ Not R | æquired | Tomas Ob | | | | | | | |
| By Whom? T | By Whom? Tony Aguilar | | | | | | Date and Hour: 8/17/2014 12:56 PM (Left Message) | | | | | | |
| Was a Watercourse Reached? ☐ Yes ☒ No | | | | | | If YES. Volume Impacting the Watercourse. | | | | | | | |
| If a Watercourse was Impacted, Describe Fully.* | | | | | | | | | | | | | |
| Describe Cause of Problem and Remedial Action Taken.* Cause of leak external corrosion, leak is at wellhead. Standing water was picked up by vacuum truck. | | | | | | | | | | | | | |
| Describe Are | a Affected | and Cleanup | Action Ta | ken.* | | | | | | | | | |
| Safety & Environmental Solutions, Inc. will delineate spill area and submit appropriate work plan. | | | | | | | | | | | | | |
| regulations a public health should their or the enviro | ill operators or the envi operations b nment. In a | are required to ironment. The have failed to | to report as e acceptans adequately OCD accep | e is true and comp ind/or file certain ice of a C-141 rep y investigate and i ptance of a C-141 | release no out by the remediate | otifications a e NMOCD m e contaminati | nd perform correct parked as "Final R ion that pose a thr | ctive actions Report" does reat to groun | for rel not rel nd wate | leases which may lieve the operator r, surface water, | v endanger r of liability human health | | |
| | | | | | OIL CONSERVATION DIVISION | | | | | | | | |
| Signature: | | . | | - | Approved by District Supervisor: | | | | | | | | |
| Printed Nam | e: Tony Ag | wilar | | <u></u> | The space | | | | | | | | |
| Title: HSE S | pecialist | | | | | Approval Da | ie: 1-6-/ | § Exp | noiteu | Date: } - 1 | F-45 . | | |
| | | | | | | Conditions of Approval: The Sychograp White Combine on your Admic to graph Syntife | | | | Attached [| 3479 | | |
| Date: 8/20/2 * Attach Addi | | ets If Necess | | 7-390-0512 | | bhie | Enende | o nu | | 1/~ | 157984 | | |
| | | | | | | and a | on John | roco isful | | | 00 65 23 5 4 | | |