District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Avenue, Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

## State of New Mexico Energy Minerals and Natural Resources

Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505 RECEIVED

MAR - 7 2012 Form C-141

Revised October 10, 2003

NMOCD ARTES A pries to appropriate
District of fice in accordance
with Rule 116 on back
side of form

## Release Notification and Corrective Action

|  |   |  |   |  | OPERA'                          | ГOR   | ☐ Initi   | al Report                              | $\boxtimes$                                    | Final Repor                              |                                 |                                   |  |
|--|---|--|---|--|---------------------------------|---|---|--|--|--|---------------------------------|-----------------------------------|--|
| Name of Company Chesapeake Operating, Inc.   |   |  |   |  |                                 |   | radley Blevin   |  |  |  |                                 |                                   |  |
| Address P.O. Box 190 Hobbs, NM 88241   |   |  |   |  |                                 | Telephone No. 575-391-1462                              |   |  |  |  |                                 |                                   |  |
| Facility Name Benson Shugart WFU #2 CTB  |   |  |   |  |                                 | Facility Type Tank Battery                              |   |  |  |  |                                 |                                   |  |
| Surface Owner Mineral Owner  |   |  |   |  |                                 |   |   |  | Lease 1  | No. API#                                 | 30-01                           | 5-20528                           |  |
| ,  |   |  |   | LOCA   | TIO                             | N OF REI  | LEASE   |  |  |  |                                 |                                   |  |
| Unit Letter  | Section   | Township   | Range   | Feet from the  |                                 | South Line  | Feet from the   | East/                                  | West Line                                      | County                                   |                                 |                                   |  |
| I  | 26  | 185  | 30E   | 2310'  |                                 | S   | 330'  |  | w  | Eddy                                     |                                 |                                   |  |
|  | Latitude <u>32.71555</u> Longitude <u>103.93542</u>     |  |   |  |                                 |   |   |  |  |  |                                 |                                   |  |
| NATURE OF RELEASE  |   |  |   |  |                                 |   |   |  |  |  |                                 |                                   |  |
| Type of Relea  | ase Water   | Volume of Release 439 bbls Volume Recovered 0 bbls                 |   |  |                                 |   |   |  |  |  |                                 |                                   |  |
| Source of Rel  | ease Corr   | Date and Hour of Occurrence Date and Hour of Discovery             |   |  |                                 |   |   |  |  |  |                                 |                                   |  |
| Was Immedia  | te Notice C   | 12/08/2011 @ 9:00 a.m. If YES, To Whom?                            |   |  |                                 |   |   |  |  |  |                                 |                                   |  |
|  |   |  |   |  |                                 |   | i   |  |  |  |                                 |                                   |  |
| Ry Whom? Rendley Playing   |   |  |   |  |                                 | Mike Bratcher, OCD Date and Hour 12/08/2011 @ 9:30 a.m. |   |  |  |  |                                 |                                   |  |
| By Whom? Bradley Blevins Was a Watercourse Reached?  |   |  |   |  |                                 | If YES, Volume Impacting the Watercourse.               |   |  |  |  |                                 |                                   |  |
| ☐ Yes ⊠ No   |   |  |   |  |                                 |   |   |  |  |  |                                 |                                   |  |
| If a Watercoun   |   |  |   |  |                                 |   |   |  |  |  |                                 |                                   |  |
| The transition corrosion on an injection line caused 439 bbls of water to leak onto the ground. 0 bbls were recovered. Sampling will be performed and remediation will be completed according to OCD guidelines.   |   |  |   |  |                                 |   |   |  |  |  |                                 |                                   |  |
| Describe Area Affected and Cleanup Action Taken.* 439 bbls of water were lost. The contaminated soil was excavated and the site was backfilled with clean soil. Sampling was performed and the results were provided to the OCD. OCD remediation approval was granted on 01/13/2012. |   |  |   |  |                                 |   |   |  |  |  |                                 |                                   |  |
| regulations all<br>public health o<br>should their op  | operators a<br>or the environerations ha<br>nent. In ad | re required to<br>onment. The a<br>ve failed to ac<br>dition, NMOO | report and<br>ecceptance<br>lequately i<br>CD accepta | s true and comple<br>l/or file certain re<br>of a C-141 repor<br>nvestigate and re<br>ance of a C-141 re | lease no<br>t by the<br>nediate | tifications and<br>NMOCD man<br>contamination           | d perform corre<br>rked as "Final l<br>n that pose a th | ective acti<br>Report" d<br>reat to gr | ions for rele<br>loes not relie<br>ound water, | ases which neve the opera<br>surface wat | nay end<br>itor of l<br>er, hum | danger<br>liability<br>nan health |  |
|  |   |  |   |  |                                 | OIL CONSERVATION DIVISION                               |   |  |  |  |                                 |                                   |  |
| Signature: Dizabley Du   |   |  |   |  |                                 | 1///  |   |  |  |  |                                 |                                   |  |
| Printed Name: Bradley Blevins  |   |  |   |  |                                 | Approved by District Supervisor:                        |   |  |  |  |                                 |                                   |  |
| Title: HSE Specialist  |   |  |   |  |                                 | Approval Date: 7/20/15 Expiration Date: W/A             |   |  |  |  |                                 |                                   |  |
| E-mail Address   |   |  |   |  | c                               | onditions of A  | Approval:   |  | 0  | Attached                                 |                                 |                                   |  |
| Date: 3 - 5  | - <u>Zol</u> a  | Z  | Phone:  | 575-391-1462   |                                 |   | <u></u>   | M                                      | <i>X</i>                                       | -  |                                 |                                   |  |
| Attach Additio   | mai Sheets  | s it necessar  | у   |  |                                 |   |   |  | 2  | RI-                                      | 15.                             | 5/                                |  |