### **Closure Report**

Prepared for Oxy USA

### **Roaring Springs 13 Fed #4 Battery**

**Eddy County, NM** 

2RP-292

Prepared by **Elke Environmental, Inc.** 

P.O. Box 14167 Odessa, TX 79768 Phone (432) 366-0043 Fax (432) 366-0884

### Elke Environmental, Inc.

P.O. Box 14167 Odessa, TX 79768 Phone (432) 366-0043 Fax (432) 366-0884

July 13, 2009

New Mexico Oil Conservation Division Mr. Mike Bratcher 1301 West Grand Ave. Artesia, New Mexico 88210

Re: Oxy USA – Roaring Springs 13 Fed #4 Battery UL'C' Sec. 13 T21S R23E Eddy County 2RP-292

Mr. Mike Bratcher,

Elke Environmental was contracted by Oxy USA to complete the remediation of the leak at the Roaring Springs 13 Fed #4 Battery. A delineation of the site was completed using an air rotary rig. During the vertical delineation a poly liner was encountered at 2' below ground surface. A borehole was drilled at this site to 96' deep and encountered a rock formation that was impenetrable by the drill rig at the site. No water bearing formations were encountered within the 96' borehole. Attached is a plat map, field analytical, lab confirmation and a driller's log for the site.

As per the approved plan 4' of impacted soil was excavated and hauled to Lea Land Disposal. Clean native soil was backfilled into the excavation and new berms built around the battery. If you have any questions about the enclosed report please contact me at the office.

Sincerely,

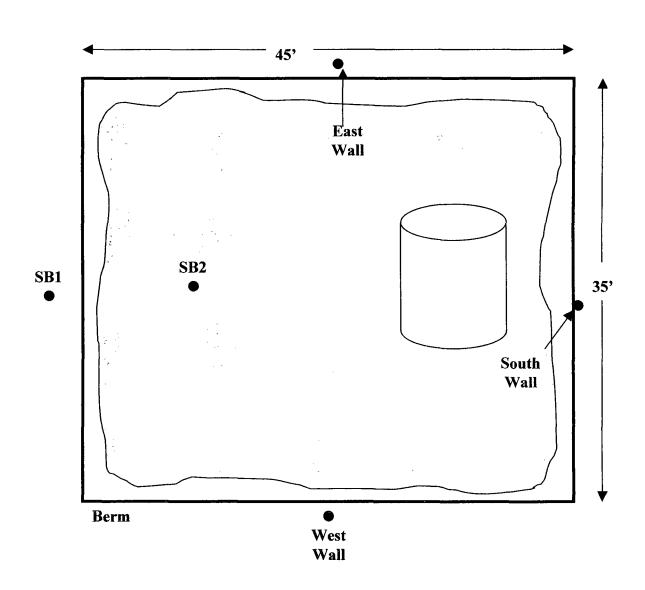
Logan Anderson

Oxy USA

Roaring Springs 13 Fed #4 Battery UL 'C' Sec. 13 T21S R23E Eddy County, NM

Plat Map





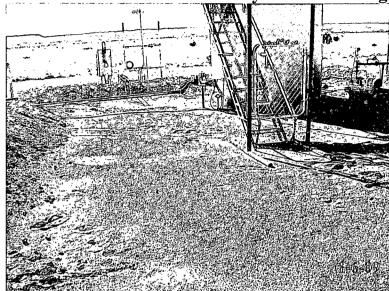
## Elke Environmental, Inc. P.O. Box 14167 Odessa, TX 79768

### Field Analytical Report Form

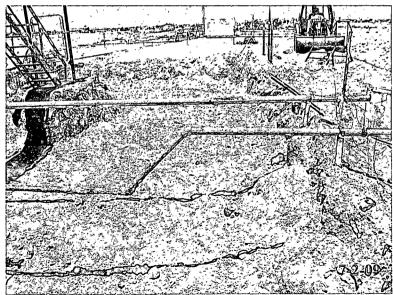
lient <u>Oxy USA</u>	<u> </u>			Analyst _	Logan An	derson
te Roaring Sp	orings 13 Fe	ed #4 Bat	tery			
Sample ID	Date	Depth	TPH / PPM	Cl/PPM	PID / PPM	GPS
SB1	1-6-09	5'	52	248	0.0	32° 29.038' N 104° 33.513' W
SB2	1-7-09	2'	74	3,353	0.0	32° 29.036' N 104° 33.513' W
SB2	1-7-09	5'		818	0.0	32° 29.036' N 104° 33.513' W
SB2	1-7-09	10'	56	270	0.0	32° 29.036' N 104° 33.513' W
South Wall	1-7-09	Surface	51	218	0.0	32° 29.033' N 104° 33.513' W
West Wall	1-7-09	Surface	47	221	0.0	32° 29.036' N 104° 33.515' W
East Wall	1-7-09	Surface	48	247	0.0	32° 29.036' N 104° 33.511' W
					*	

Analyst Notes\_

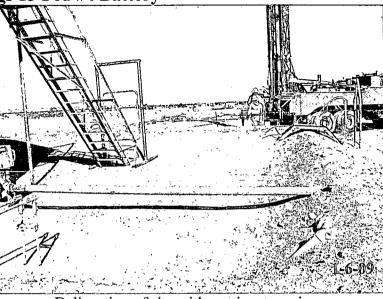
Oxy USA - Roaring Springs 13 Fed #4 Battery



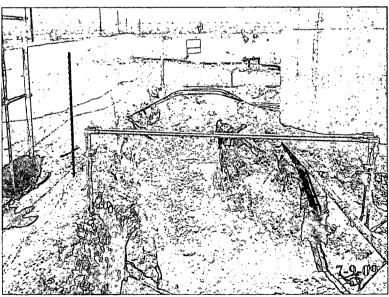
Site before remediation of impacted soil.



Site after excavation of 4' of impacted soil.

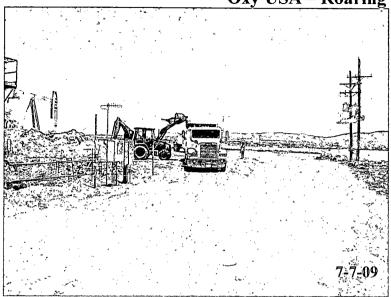


Delineation of site with an air rotary rig.

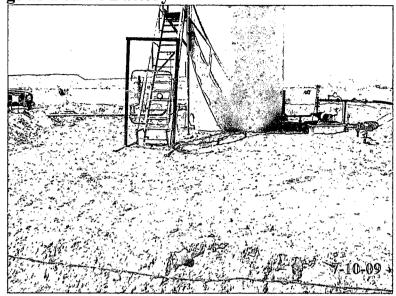


Site after excavation of 4' of impacted soil.

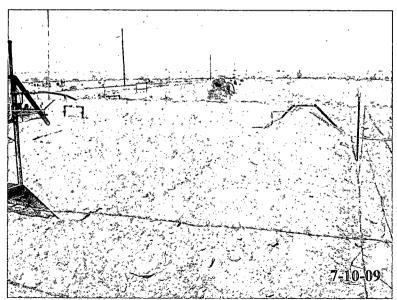
### Oxy USA – Roaring Springs 13 Fed #4 Battery



Loading impacted soil on truck for disposal.



Site after backfill of clean caliche and rebuilt berms.



Site after backfill of clean native soil and rebuilding berms around the tank.

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FOR OSE INTERNAL USE		WELL RECORD & LOG	(Version 6/9/08)	
FILE NUMBER	POD NUMBER	TRN NUMBER		
LOCATION			PAGE 1 OF 2	

	TYPE OF	PUMP:	SUBMERSIBLE	□ JET	☐ NO PUMP ~ WELL NOT EQUIPPED					
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	11	12	1		DARK GRAY CLAY					
=	12	17	5		TAN SILTY CLAY/SILTY SAND					
Z E	17	. 20	3		GRAY LIMESTONE		☐ YES	Ø NO □		
ā	20	31	11		DARK GRAY SILTY CLAY		☐ YES	Ø NO		
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Ŏ	4:1	43	2		TAN SANDY CLAY		☐ YES	Ø NO		
GEC	43	47	4		TAN VERY FINE SAND		☐ YES	☑ NO		
9	47	51	4		GRAY SANDY CLAY		☐ YES	☑ NO		
	51	64	13		TAN FINE SAND/SANDSTONE	Ξ	☐ YES	☑ NO		
	64	65	1		TAN FINE SAND/SANDSTONE/CAI	ICHE	☐ YES	☑ NO		
	65	87	22		TAN FINE SAND/SANDSTONI	=	☐ YES	☑ NO		
	87	90	3	TAN	/ERY FIND SAND/DARK BROWN S	ANDY CLAY	☐ YES	Ø NO		
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FOR OSE INTERNAL USE		WELL RECORD & LOG	(Version 6/9/08)
FILE NUMBER	POD NUMBER	TRN NUMBER	
LOCATION			PAGE 2 OF 2

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			TURBINE	CYLINDER .	☐ OTHER – SPECIFY:			
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FOR OSE INTERNAL USE		WELL RECORD & LOG (Version 6/9/08)
FILE NUMBER	POD NUMBER	TRN NUMBER
LOCATION		PAGE 2 OF 2

LOCATION

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PAGE 1 OF 2

чР	TYPE OF PUMP:		☐ SUBMER		☐ JET ☐ CYUNDER	☐ NO PUMP – WELL NOT EQUIPPED ☐ OTHER – SPECIFY:						
SEAL AND PUMP			DEPTI	(FT)	BORE HOLE DIA. (IN)	MATERIAL TYPE AND SIZE	AMOUNT	METHO PLACE				
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	37	39	2			TAN SILTY SAND WITH CLAY	,	☐ YES	☑ NO			
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N. A. H.	THEPE	KMLI HOI	DEK MUHU	8 20 DAYS /	AFTER COMPLET	ION OF WELL DRILLING:						
8. SIGNATURE		3/2	1 Dr			1/12/09						
×	1		SIGNATU	RE OF DRII	LER	DATE						
								3500				

FOR OSE INTERNAL USE		WELL RECORD & LOG (Version 6/9/08)
FILE NUMBER	POD NUMBER	TRN NUMBER
LOCATION		PAGE 2 OF 2

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257

Non	HAZARDOUS WASTE MANIE	EST NO	J68651	1. PA	GEOF	2. TRAD	ER NO.	1-1-
G	3. COMPANY NAME CXY USA PHONE NO.	4. ADDRESS 102 S. Main St CITY Carlsbad	reet STATE NM			CK-UP DATE 7/7/2009 RCC I.D. NO		
	7. NAME OR DESCRIPTION OF WASTE SHIPPE	D:		·	TAINERS	9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #
N	<sup>a</sup> Non-Regulated, Non Hazardous Was	t <del>a</del>		4	СМ			
	<b>b</b> .							
E	c							
R	1.508,80 J37	AM)						
$\mathbf{A}$	12 COMMENTS OR SPECIAL INSTRUCTIONS: ROARING SPRINGS 13 FEDERAL #	W EATTERY				13. WASTE I	PROFILE N	o. 709594
		SE OF EMERG	ENCY OR SPIL	L, COI	NTACT			
T	Name Kin Slauchter	PHONE NO 575-887-4048				24-HOUI	R EMERGE	NCY NO.
O	15 GENERATOR'S CERTIFICATION shipping name and are classified, packed, marked, ar international and national government regulations, in	nd labeled, and are in a	ll respects in proper co	ndition f	or transport	by highway a	ccording to	applicable
R	PRINTED/TYPED NAME		SIGNATURE					DATE
T R A N S P O R T E R	IN CASE OF EMERGENCY CONTACT:  EMERGENCY PHONE:  18. TRANSPORTER (1): Acknowledgment	ELTON BEAIRD 5) 390-1903 of receipt of material		RGENC ONE: RTER	Y CONTAC	wledgment of	receipt of a	naterial
<b>D F</b>	Lea Land, LLC	ADDRESS:	SIGNATURE  Marker 64, U  Miles East of Ca	A 10 10 10 10 10 10 10 10 10 10 10 10 10		PHONE		87-4048
S C P I O L	PERMIT NO.  WM-01-035 - New Mex		20. COMMENTS					
$\begin{bmatrix} \mathbf{S} & \widetilde{\mathbf{I}} \\ \mathbf{A} & \mathbf{T} \\ \mathbf{L} & \mathbf{Y} \end{bmatrix}$	21 DISPOSAL FACILITY'S CERTIFIC facility is authorized and permitted to receive such	CATION: I Hereby wastes.	· ***	describe	d wastes we	re delivered t	o this facilit	y, that the
	AUTHORIZED SIGNATURE	TIVOLOS	CELL NO.		DATE	7/7/2009	T	(B)

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

#### LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257 U68653 NON-HAZARDOUS WASTE MANIBEST 1. PAGE 2. TRAILER NO NO 4. ADDRESS 3. COMPANY NAME 5. PICK-UP DATE 7/7/2009 102 S. Main Street OXY USA  $\mathbf{G}$ 6. TNRCC I.D. NO. PHONE NO. CITY STATE ZIP Carisbad NA 88220 E 8. CONTAINERS 9. TOTAL 10. UNIT 11. TEXAS 7. NAME OR DESCRIPTION OF WASTE SHIPPED: QUANTITY Wt/Vol. WASTE ID # No. Type <sup>a</sup>Non-Regulated, Non Hazardous Waste CM E R 12. COMMENTS OR SPECIAL INSTRUCTION 13. WASTE PROFILE NO. ROARING SPRINGS 13 FEDERAL ALBATTERY 709594 A IN CASE OF EMERGENCY OR SPILL, CONTACT 14. NAME Kin Slaughter PHONE NO 575-887-4048 24-HOUR EMERGENCY NO. T 15 GENERATOR'S CERTIFICATION: I Hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable 0 international and national government regulations, including applicable state regulations, and are the same materials previously approved by LEA LAND, LLC PRINTED/TYPED NAME SIGNATURE DATE Ŕ TRANSPORTER (1) TRANSPORTER (2) Т 16. R ELKE ENVIRONMENTAL, INC NAME: NAME: A .N TEXAS I.D. NO. TEXAS I.D. NO. S KELTON BEARD IN CASE OF EMERGENCY CONTACT: IN CASE OF EMERGENCY CONTACT: P (575) 390-1903 O EMERGENCY PHONE R 18. TRANSPORTER (1): Acknowledgment of receipt of material 19. TRANSPORTER (2): Acknowledgment of receipt of material T  $\mathbf{E}$ PRINTED/TYPED NAME R 2009 SIGNATURE ADDRESS: PHONE: Lea Land, LLC Mile Marker 64, U.S. Hwy 62/180, 505-887-4048 D 30 Miles East of Carlsbad, NM 20. COMMENTS PERMIT NO. S C WM-01-035 - New Mexico P 1 O 21. DISPOSAL FACILITY'S CERTIFICATION: I Hereby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes. A T ·Y AUTHORIZED SIGNATURI CELL NO. DATE 7/7/2009

TRANSPORTERS: COPIES 4 & 5

GENERATOR: COPIES 1 & 6

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF GARLSBAD, NM • PHONE (505) 887-4048

### LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257 068655 NON-HAZĀRĀDOLS WASTE MANGEEST 1. PAGE OF 2. TRAILER NO 3. COMPANY NAME 4. ADDRESS 5. PICK-UP DATE 102 S. Main Street OXY USA 7/7/2000 G PHONE NO. CITY STATE ZIP 6. TNRCC I.D. NO. Carlabad NA 89220  $\mathbf{E}$ 8. CONTAINERS 9. TOTAL 10. UNIT 11. TEXAS 7. NAME OR DESCRIPTION OF WASTE SHIPPED: No. Type QUANTITY Wt/Vol. WASTE ID # a Non-Regulated, Non Hazardous Waste Ń CM  $\mathbf{E}$ Ŕ 13. WASTE PROFILE NO. 12. COMMENTS OR SPECIAL INSTRUCTIONS ROARING SPRINGS 13 FEDERAL #4 BATTERY 708594 A IN CASE OF EMERGENCY OR SPILL, CONTACT PHONE NO 675-887-4048 NAME Kin Slaughter 24-HOUR EMERGENCY NO. Ί 15.GENERATOR'S CERTIFICATION: THereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable **O** international and national government regulations, including applicable state regulations, and are the same materials previously approved by LEALAND, LLC PRINTED/TYPED NAME SIGNATURE DATE R TRANSPORTER (1) T 17. TRANSPORTER (2) 16. R ELKE ENVIRONMENTAL, INC. NAME: NAME: A N TEXAS I.D. NO TEXAS I.D. NO. S KELTON BEAIRD IN CASE OF EMERGENCY CONTACT: IN CASE OF EMERGENCY CONTACT: P (575) 390-1903 Ó EMERGENCY PHONE: R 18. TRANSPORTER (1): Acknowledgment of receipt of material 19. TRANSPORTER (2): Acknowledgment of receipt of material T E PRINTED/TYPED NAME R 7/7/2009 S SIGNATURE ADDRESS: PHONE: Lea Land, LI Mile Marker 64, U.S. Hwy 62/180, 505-887-4048 D F 30 Miles East of Carlsbad, NM S C WM-01-035 - New Mexico 1 CERTIFICATION: I Hereby certify that the above described wastes were delivered to this facility, that the 21 DISPOSAL FACILITY lity is authorized and permitted to receive such T Y CELL NO. DATE

7/7/2009

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

### LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257

	1500 WEST MAIN STREET			1		e galanda Kalendaran		<u>U3</u>		
NON	HAZARDOUS WASTE MANIFESI	110	168657	1. PAG	EOF	_ 2. TRÁIL	ER NO.	$\mathcal{L}\mathcal{H}$		
G		DRÈSS 25 Main St	ree <b>t</b>		5. PI	CK-UP DATE				
77.7	PHONE NO. CITY		STATE	7	IP 6. TI	RCC I.D. NC				
		rrisbad	WM	882		wee i.b. ive				
E	7. NAME OR DESCRIPTION OF WASTE SHIPPED:			8. CONT	2	9. TOTAL	10. UNIT	11. TEXAS		
				No.	Туре	QUANTITY	Wt/Vol.	WASTE ID #		
N	Alten-Regulated Non Hazardous Weste			1	CM					
3 d 3 d 3	b.									
E	<b>c.</b>									
	d. 1271 \\ \( \text{12} \)									
R	12,48U 9 06	Dol /								
	12. COMMENTS OR SPECIAL INSTRUCTIONS: ROADING SPRINGS 13 FEDERAL #4 B.	ATTERV				13. WASTE I	ROFILE N	10. 708594		
, <b>A</b>		111000	<u> </u>					y Charactores		
			ENCY OR SPIL	L, CON	TACT					
T		IONE NO 15-087-4048				24-HOUI	REMERGE	NCY NO.		
	CONTED A TODIC GERRONICATION.				1 Page	erle e				
1 O	15.GENERATOR'S CERTIFICATION: I He shipping name and are classified, packed, marked, and laborated the control of the control	eled, and are in al	l respects in proper co	ondition fo	or transport	by highway ac	cording to	applicable		
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	international and national government regulations, including	ng applicable stat	e regulations, and are	the same	materials p	reviously appr				
Ŕ	PRINTED/TYPED NAME		SIGNATURE					DATE		
T R	16. TRANSPORTER (1)		17,7	TR	ANSPO	RTER (2)				
A	NAME: ELVE ENVIRONMENTAL I	NVC	NAME:							
N	TEXAS I.D. NO.		TEXAS I.D. NO.	e e e e e e e e e e e e e e e e e e e		en in A				
S P	IN CASE OF EMERGENCY CONTACT:	IN BEARD	IN CASE OF EMERGENCY CONTACT:							
0	EMERGENCY PHONE: (575) 3	30-19403	EMERGENCY PH	IONE:						
R T	18. TRANSPORTER (1): Acknowledgment of rec	eipt of material	19. TRANSPO	RTER (	(2): Ackno	wledgment of	receipt of	material		
T E	PRINTED/TYPED NAME ALLOW AND	adu	PRINTED/TYPEI	O NAME				· ·		
R S	X MUNITER		2009							
	STANATURE DA	TE	SIGNATURE				DATE			
	1	DDRESS:		~ ~~		PHONE				
D F	Lea Land, LLC		Marker 64, U	The same of the first	•	30,	505-8	87-4048		
I A	PERMIT NO.	30 N	Ailes East of C 20. COMMENTS	arisbac	1, NM		. · · · · · · · · · · · · · · · · · · ·			
S C P I	WM-01-035 - New-Mexico	Part State Control of the Control of	20. COMMENTS							
OL										
S I A T	21 DISPOSAL FACILITY'S CERTIFICAT facility is authorized and permitted to receive such waste.	Hereby	certify that the above	e described	i wastes w	ere delivered t	o this facili	ty, that the		
LY	AUTHORIZED SIGNATURE	N	CELL NO.		DAT		т	TME .		
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	HANNAMIN	TIMAY)	Ł	<u></u>		and the first of the second				

GENERATOR: COPIES 1 & 6

DISPOSAL SITE: COPIES 2 & 3

TRANSPORTERS: COPIES 4 & 5

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

1300 WES	LEA LA	ND, LLC MA CITY, OK 73106 • P	HONE (405) 236-42:	57	11 21
N-HAZARDOUS WASTE	MANHEST NO	068660	1. PAGEOF_	2. TRAILER N	10. ()4
3. COMPANY NAME  CYXY USA PHONE NO.	4. ADDRESS 102 S. Main CITY	Street STATE		CK-UP DATE 7/7/2000 NRCC I.D. NO.	
7. NAME OR DESCRIPTION OF WA	STE SHIPPED:	148.7	8. CONTAINERS No. Type		UNIT 11. TEXAS
a. Non-Regulated, Non Hazard	dous Waste	•	1 CM		
b.					
LE CORCU	7 (2) 21 21				
12. COMMENTS OR SPECIAL INST		TOXU		13. WASTE PROF	 ILE NO. 70859
14. NAME Kin Slaughter	IN CASE OF EMER PHONE NO 575-887-404		L, CONTACT	24-HOUR EM	ERGENCY NO.
15.GENERATOR'S CERTIFI shipping name and are classified, packed international and national government PRINTED/TYPED NAME	ed, marked, and labeled, and are i	n all respects in proper co	ondition for transport	by highway accordi	ing to applicable
TEXAS I.D. NO. IN CASE OF EMERGENCY CONTA EMERGENCY PHONE: 18. TRANSPORTER (1): Ackr	ONMENTAL, INC.  ACT: KELTON BEAIR  (575) 390-1903  nowledgment of receipt of materi	EMERGENCY PI al 19. TRANSPO PRINTED/TYPE	RTER (2): Ackno	C <b>T</b> .	pt of material
SENATURE	ADDRESS:	77 200 ENATURE		PHONE:	
Lea Land, LLC PERMIT NO. WM-01-035	30	(ile Marker 64, U ) Miles East of C 20. COMMENTS		30,   50	05-887-4048
L 21 DISPOSAL FACILITY'S facility is authorized and permitted to	CERTIFICATION: 1 Her				#
AUTHORIZED SIGNATURE	MUIONOS	CELL NO.	DAT	7/7/2009	TIME

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

#### LEA LAND, LLC

	1300 WEST MAIN ST	REET • OKLAHOMA		HONE (4	05) 236-4	257	F	HP .
VO V	HAZARĐOUS WASTE MANIE	EST NO.	068674	1. PAC	GEOF_	2. TRAII	ER NO.	)-1
G.	3. COMPANY NAME OXY USA PHONE NO.	4. ADDRESS 107. S. Main St CITY Carlsbad	reet State NM			PICK-UP DATE 7/8/2009 INRCC LD. NO		
	7. NAME OR DESCRIPTION OF WASTE SHIPPE	er i fise and a story and a second			TAINERS Type	9. TOTAL QUANTITY	10. UNIT	11. TEXAS WASTE ID #
N	a Non-Regulated, Ivon Hazardous Was	**		4	СМ			
	<b>b.</b>							
E	c							
R	· 7860 DUIT	<b>७०</b> ३मः	7330					
	12. COMMENTS OR SPECIAL INSTRUCTIONS:		M-OV			13. WASTE I	I PROFILE N	
A	ROARING SPRINGS 13 FEDERAL #	M BATTERY						709594
	14. IN CA NAME KIN SLAUGHTER	XSE OF EMERG PHONE NO 575-887-4046	ENCY OR SPIL	L, COI	NTACT		R EMERGE	NCY NO
0	15. GENERATOR'S CERTIFICATION shipping name and are classified, packed, marked, are international and national government regulations, in	nd labeled, and are in a	Il respects in proper co	ondition f	or transpor	rt by highway ac	cording to	applicable
R	PRINTED/TYPED NAME		SIGNATURE					DATE
T R A N S P O R	EMERGENCY PHONE: (57)	ELTON BEAIRD 5) 990-1903	17.  NAME:  TEXAS I.D. NO.  IN CASE OF EME  EMERGENCY PH	ERGENC	y CONTA			
T E R S	RRINTED/TYPED NAME SIGNATURE (1): Acknowledgment	MO VO	19. TRANSPO PRINTED/TYPEI 2000 SIGNATURE		(2): Ackr			material
D F	ADDRESS: PHONE:  Lea Land, LLC Mile Marker 64, U.S. Hwy 62/180, 505-887-4048							
I A S C P I O L	PERMIT NO.  WM-01-035 - New Me.	xico	20: COMMENTS					
S I A T	21 DISPOSAL FACILITY'S CERTIFIC facility is authorized and permitted to receive such	CATION: I Hereby wastes.	certify that the above	describe	d wastes v	were delivered to		
LY	AUTHORIZED SIGNATURE	trivoins	CELL NO.		DA	TE 7/8/2009	L	J <sub>w</sub>

MILE MARKER #64 US HWY, 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

1300 WE	LEA LAI ST MAIN STREET • OKLAHOMA		PHONE (4	05) 236-42	<b>57</b>	ιρο	01107
CHAZARDOUS WASTE	MANIEEST NO	068675	1. PAC	GEOF_	2. TRAIL	ER NO.	149
3. COMPANY NAME OXY USA	4. ADDRESS 102 S. Main S	treet		5. P	ICK-UP DATE 7/3/2000		
PHONE NO:	CITY Carlsbad	STATE NM		ZIP 6. T 220	NRCC I.D. NO	).	
7 NAME OR DESCRIPTION OF WA	STE SHIPPED:		8. CON No.	TAINERS Type	9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXA WASTE II
<sup>a</sup> Non-Regulated, Non Hazar	dous Waste		1	CM			
· 341,980 <sub>c</sub>							
12. COMMENTS OR SPECIAL INST ROARING SPRINGS 13 F	· Andread Andread Andread Angree (1982) (1987) (1984) (1984) (1984) (1984) (1984) (1984)				13. WASTE I	PROFILE N	O. 708
15. GENERATOR'S CERTIF shipping name and are classified, pack international and national government PRINTED/TYPED NAME	ed, marked, and labeled, and are in	all respects in proper	condition i	for transpor	t by highway a	ccording to	applicable
16. TRANSPORMANE: ELKE ENVIRONT TEXAS I.D. NO. IN CASE OF EMERGENCY CONTRACTOR EMERGENCY PHONE:	ONMENTAL, INC.	17.  NAME:  TEXAS LD, NO.  IN CASE OF EMERGENCY F	1ERGENC		ORTER (2)		
18. TRANSPORTER (1): Ack PRINTED/TYPED NAME SIGNATURE	en Vasque	The second secon	ORTER		owledgment o	f receipt of	material
Lea Land, LLC		le Marker 64, l Miles East of 0			80, PHONE		87-4048
PERMIT NO. WM-01-035 -		20. COMMENTS					
21. <b>PISPOSAL FACILITY'S</b> facility is authorized and permitted of		by certify that the abo	ve describ	ed wastes v	were delivered	to this facili	ty, that the
Y AUTHORIZED SIGNATURE	U HIVOIR	CELL NO:		DA	TE 7/8/200		CO

# LEA LAND DISPOSAL SITE NEW MEXICO MILE MARKER #64 US HWY 62/180 • 30 MILES BAST OF CARLSBAD, NM • PHONE (505) 887-4048

		1300 WEST MAIN STRI	LEA LAN EET • OKLAHOMA		HQNH (4	05) 236-42	57 7	l m	CV111-
SON		HAZARDOUSAVASIEEMANIFE		<b>१६७ में १५</b> ०	1) PA	18 Z	$\sqrt{\lambda} \sqrt{M}$	R NO.	TUG
G	3. (	COMPANY NAME  OXY USA	. ADDRESS 102 S. Main St	eet STATE		$\overline{X}$	GKAUP DATE AAV2009		
E	Pi		Carlsbad	NM		220	T.D. IV		
<b>. E.</b>	7.	NAME OR DESCRIPTION OF WASTE SHIPPED	The second secon			TAINERS Type	9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #
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<i>:</i> .	b.								
E	. c.		w.						
R	d	139911 D 320	SAIC	241.04	$\wedge$				
		2. COMMENTS OR SPECIAL INSTRUCTIONS:	(XVI)	- 111/21			13. WASTE I	ROFILE N	\ \ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
A		HOARING SPRINGS 13 FEDERAL #4	BATTERY				÷	n Niegi Viena	708594
 		4. IN CAS	SE OF EMERGI PHONE NO	ENCY OR SPIL	L, CO	NTACT	24 HOVI	R EMERGE	NGV NO
T	ľ	KIN SLAUGHTER	575-887-4048				24- <b>N</b> OUF	EWERGE	NCT NO.
0	.   5	5 GENERATOR'S CERTIFICATION: hipping name and are classified, packed, marked, and netroational and national government regulations, inc	l labeled, and are in a	l respects in proper c	ondition f	or transport	by highway ac	cording to	applicable
R	]	PRINTED/TYPED NAME	e de la companya de	SIGNATURE					DATE
T R		16. TRANSPORTER (1)		17.	T1	RANSPO	RTER (2)		
A		NAME: ELKE ENVIRONMENTA	L, INC	NAME:					
N S		TEXAS I.D. NO.	LTON BEAIRD	TEXAS I.D. NO.	an arriva		~		
P		IN CASE OF EMERGENCY CONTACT:	) 390-1903	IN CASE OF EMI EMERGENCY PI	الم ب	Y CONTAC	VI: \		
R T		18. TRANSPORTER (1): Acknowledgment of	f receipt of material	19. TRANSPO		(2): Ackno	owledgment of	receipt of r	naterial
E R		PRINTED/TYPED NAME (1) 1 V /		PRINTED/TYPE	D NAME				
S	^	SIGNATURE CONTINUE CO	DATE 7/8	2009 SIGNATURE		<del></del>		DATE	
			ADDRESS:	<u> </u>			PHONE		
D	F	Lea Land, LLC		e Marker 64, U Miles East of C	4.		30,	505-88	37-4048
	A C	PERMIT NO.	301	20. COMMENTS	arista	u, INIVI			
P	I	WM-01-035 - New Mex	ico			•			
O S A	L I T	21.DISPOSAL FACILITY'S CERTIFIC facility is authorized and permitted to receive such w		certify that the above	e describe	d wastes w	ere delivered to	this facilit	y, that the
L	Ÿ	AUTHORIZED SIGNATURE	Work	CELL NO.		DAT	E 7/8/2009	-	105
GEN	ER	ATOR: COPIES 1 & 6	DISPOSAL SIT	E: COPIES 2 & 3			TRANS	PORTERS	COPIES 4 & 5

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

#### LEA LAND, LLC

	1300 WEST MAIN ST	一点,我们知识的"人"的	MA CITY, OK 73106 • P	HONE (40	)5) 236-42 	57	DD	5
NON	ILAZARDOUS WASTE MANIF	EST NO	058677	1. PAG	E_OF_	2. TRAIL	ER NO.	UH
G	3. COMPANY NAME OXY USA PHONE NO.	4. ADDRESS 102 S. Main				ICK-UP DATE 7/4/2009		
		City   Carlsbad	STATE	S82		NRCC I.D. NO		
E	7. NAME OR DESCRIPTION OF WASTE SHIPPE			8. CONT		9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #
N	<sup>a</sup> tion-Regulated, Non Hazardous Wasi			No.	Type Civi		vol.	wie II)#
E	b. 3/41/4/							
R	4 41/8 LOS 32	7140						
A	12. COMMENTS OR SPECIAL INSTRUCTIONS: ROARING SPRINGS 13 FEDERAL #	And the property of				13. WASTE P	ROFILE N	io. 702594
T	14. IN CA NAME KIN SLAUGHTER	ASE OF EMER PHONE NO 575-667-404	GENCY OR SPIL	L, CON	TACT	24-HOUR	EMERGE	NCY NO.
O	15 GENERATOR'S CERTIFICATION: shipping name and are classified, packed, marked, an international and national government regulations, in	nd labeled, and are in	in all respects in proper co	ondition fo	or transport	t by highway ac	cording to	applicable
R	PRINTED/TYPED NAME		SIGNATURE					<b>DATE</b>
T R A	16. TRANSPORTER (1) NAME: ELKE ENVIRONMENTA	AL, INC	17. NAME:	TI	RANSPC	ORTER (2)		
N S P	TEXAS I.D. NO. IN CASE OF EMERGENCY CONTACT:	ELTON BEAR	TEXAS I.D. NO. IN CASE OF EMI	ERGENCY	Y CONTAC	on:		
O R	EMERGENCY PHONE: (578	5) 990-1903	EMERGENCY PH	HONE:				
T E	18. TRANSPORTER (1): Acknowledgment					owledgment of	receipt of I	naterial
R	PRINTED/TYPED NAME ATTACK		PRINTED/TYPEI  /@ 2009 SIGNATURE	D NAME		I	DATE	
D F	Lea Land, LLC		lile Marker 64, U O Miles East of C		•	80, PHONE:		87-4048
I A S C P I O L	PERMIT NO.  WM-01-035 - New Mex		20. COMMENTS			<del> </del>		
S I A T	21. DISPOSAL FACILITY'S CERTIFIC facility is authorized and permitted to receive such	CATION: I Here wastes.	eby certify that the above	e describe	d wastes w	ere delivered to	this facilit	y, that the
LY	AUTHORIZED SIGNATURE	Tivolos	CELL NO.		DAT	7/8/2000	The	IME 5

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

PHONE NO.  CTY STATE ZIP 6. INNEC LD NO.  Cyridosed N.M. 98227  7. NAME OR DESCRIPTION OF WASTE SHIPPED:  No. 1ype QUANTITY WVVol. WASTE PROFILE NO.  7. NAME OR DESCRIPTION OF WASTE SHIPPED:  No. 1ype QUANTITY WVVol. WASTE PROFILE NO.  11. COMMENT OR SPECIAL INSTRUCTIONS.  ROAPINGS SPRINGS 13 FEDERAL SREATTERY  12. COMMENT OR SPECIAL INSTRUCTIONS.  ROAPING SPRINGS 13 FEDERAL SREATTERY  13. MASTE PROFILE NO.  7. TROBE NO.  14. IN CASE OF EMERGENCY OR SPILL, CONTACT  PHONE NO.  15. GENERATOR'S CERTIFICATION: 1 Hereby declare that the contests of this consignment are fully and securately described above by supplicate under and are classified, peeded, matricel, and labeled, and are in all respects in proper conditions for transport by highway according to applicate underrustional and national governance regulators, including applicable star regulators, and are the same materials previously approved by IEA LAN  PRINTED/TYPED NAME  16. TRANSPORTER (1)  17. TRANSPORTER (2)  NAME:  16. TRANSPORTER (1)  17. TRANSPORTER (2)  NAME:  16. TRANSPORTER (1)  17. TRANSPORTER (2)  NAME:  18. TRANSPORTER (1): Acknowledgment of receips of material  19. TRANSPORTER (2): Acknowledgment of receips of material  19. TRANSPORTER (3): Acknowledgment of receips of material	1300 WEST MAIN	LEA LA		HONE (4	05) 236-4	257	111	
PHONE NO.  CRY USA  102 S. Main Striest  CRY 6 STATE  CRY  FROM 98220  7. NAME OR DESCRIPTION OF WASTE SHIPPED  NO. Type  QUANTITY  WOOL  11. TO THE CONTACT  PHONE NO.  TO THE PROPERTY OF SPECIAL INSTRUCTIONS.  TO THE PHONE NO.	GHAZARDOUS WASTIE VIAN	IIISI NO	068678	1. PAC	GEOF_	2. TRAII	ER NO.	Ϋ́L
Certebed NM 98220 7. NAME OR DESCRIPTION OF WASTE SHIPPED: 8. CONTAINUES 9. TOTAL 10. UNIT 11. TO NO. Type QUANTITY WOVIOL WASTE AND A CONTAINUES 19. TOTAL 10. UNIT 11. TO NO. Type QUANTITY WOVIOL WASTE AND A CONTAINUES 19. TOTAL 10. UNIT 11. TO NO. Type QUANTITY WOVIOL WASTE AND A CONTAINUES 19. TOTAL 10. UNIT 11. TO NO. TOTAL 10. UNIT 11. TOTAL 11. UNIT 11. TOTAL 10.	3. COMPANY NAME OXY USA		tmat		5. P			
No. Type QUANTITY WOVIOL WAST Nor-Regulated, Non-Hazardous Wasile 1 CM 1  CM 13. WASTE PROFILE NO. 12. COMMENTS OR SPECIAL INSTRUCTION 15. WASTE PROFILE NO. 77. WASTE PROFILE N	HONE NO					INRCC I.D. NO		
12. COMMENTS OR SPECIAL INSTRUCTIONS 13. WASTE PROFILE NO. 12. COMMENTS OR SPECIAL INSTRUCTIONS 14. IN CASE OF EMERGENCY OR SPILL, CONTACT 15. GENERATOR'S CERTIFICATION: I Hereby declare that the contents of this consignment are fully and accurately described above by shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable state regulations, and are the same materials previously approved by LEA LAN PRINTED/TYPED NAME 16. TRANSPORTER (1) 17. TRANSPORTER (2) NAME: ELKE ENVIRONMENTAL, INC. 18 TRANSPORTER (1): Acknowledgmogst of receipt of material 19 TRANSPORTER (2): Acknowledgmont of receipt of material 20 TO THE TOTAL TO	7. NAME OR DESCRIPTION OF WASTE SHII	PPED:				100 100 100 100 100 100 100 100 100 100		11. TEX. WASTE I
ROARING SPRINGS 13 FEDERAL ### BATTERY  IN CASE OF EMERGENCY OR SPILL, CONTACT  NAME PHONE NO 575-887-4048  15 GENERATOR'S CERTIFICATION: I Hereby declare that the contents of this consignment are fully and accurately described above by shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable interpretational and national government regulations, including applicable state regulations, and are the same materials previously approved by LEA LAW PRINTED/TYPED NAME  SIGNATURE  16. TRANSPORTER (1) 17. TRANSPORTER (2) NAME: 18. CASE OF EMERGENCY CONTACT EMERGENCY PHONE: 18. TRANSPORTER (1): Acknowledgment of receipt of material PRINTED/TYPED NAME  SIGNATURE  19. TRANSPORTER (2): Acknowledgment of receipt of material PRINTED/TYPED NAME  SIGNATURE  PRINTED/TYPED NAME  SIGNATURE  ADDRESS:  Lea Land, LLC  Mille Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM  PERMIT NO.  WM-01-035 - New Mexico  21. DISPOSAL FACILITY'S CERTIFICATION: 1 Hereby certify that the above described wastes were delivered to this facility, that of facility is authorized and permitted to receive such wastes.  CELL NO.  DATE  TIME	Non-Regulated, Non Hazardous VV			•	CM			
ROARING SPRINGS 13 FEDERAL #48 BATTERY  IN CASE OF EMERGENCY OR SPILL, CONTACT  NAME PHONE NO 576-887-4048  15 GENERATOR'S CERTIFICATION: 1 Hereby declare that the contents of this consignment are fully and accurately described above by shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable interpational and national government regulations, including applicable state regulations, and are the same materials previously approved by LEA LAW PRINTED/TYPED NAME  SIGNATURE  SIGNATURE  TEXAS LD. NO. IN CASE OF EMERGENCY CONTACT. EMERGENCY PHONE  18 TRANSPORTER (1): Acknowledgment of receipt of material PRINTED/TYPED NAME  SIGNATURE  TEXAS LD. NO. IN CASE OF EMERGENCY CONTACT. EMERGENCY PHONE  19 TRANSPORTER (2): Acknowledgment of receipt of material PRINTED/TYPED NAME  SIGNATURE  ADDRESS:  Lea Land, LLC  Mile Marker 64, U.S. Hwy 62/180, SO5-887-40 30 Miles East of Carlisbad, NM  PERMIT NO.  WM-01-035 - New Mexico  21 DISPOSAL FACILITY'S CERTIFICATION: 1 Hereby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes.  AUTHORIZERS SIGNATURE  CELL NO.  DATE  TIME	j.							
ROARING SPRINGS 13 FEDERAL #49 BATTERY  IN CASE OF EMERGENCY OR SPILL, CONTACT  NAME PHONE NO 575-887-4048  15.GENERATOR'S CERTIFICATION: 1 Hereby declare that the contents of this consignment are fully and accurately described above by shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations, and are the same materials previously approved by LEA LAN  PRINTED/TYPED NAME  SIGNATURE  16. TRANSPORTER (1)  IN CASE OF EMERGENCY CONTACT  EMERGENCY PHONE  18. TRANSPORTER (1): Acknowledgment of receipt of material  PRINTED/TYPED NAME  SIGNATURE  19. TRANSPORTER (2): Acknowledgment of receipt of material  PRINTED/TYPED NAME  SIGNATURE  DATE  ADDRESS:  Lea Land, LLC  Mile Marker 64, U.S. Hwy 62/180, 505-887-40  30 Miles East of Carlsbad, NM  PERMIT NO.  WM-01-035 - New Mexico  21. DISPOSAL FACILITY'S CERTIFICATION: 1 Hereby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes.  CELL NO. DATE  TIME  ADTERNATION: TIME  TIME								
ROARING SPRINGS 13 FEDERAL 49 BATTERY  IN CASE OF EMERGENCY OR SPILL, CONTACT  NAME PHONE NO 576-887-4038  15. GENERATOR'S CERTIFICATION: 1 Hereby declare that the contents of this consignment are fully and accurately described above by shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable interpational and assional government regulations, including applicable state regulations, and are the same materials previously approved by LEA LAN PRINTED/TYPED NAME SIGNATURE  SIGNATURE  TRANSPORTER (1) 17. TRANSPORTER (2) NAME: 16. TRANSPORTER (1) 17. TRANSPORTER (2) NAME: 18. TRANSPORTER (1) 19. TRANSPORTER (2): Acknowledgment of receipt of material 20. Signature 20. Signature 20. Signature 20. Signature 20. COMMENTS  DATE  Lea Land, LLC 30. Miles East of Carlsbad, NM  PERMIT NO. 20. COMMENTS  20. COMMENTS  TIME 21. DISPOSAL FACILITY'S CERTIFICATION: 1 Hereby certify that the above described wastes were delivered to this facility, that of facility is authorized and permitted to receive such wastes.  AUTHORIZER SIGNATURE  CELL NO.  DATE  TIME	1710181 325	sam@	47087					
IN CASE OF EMERGENCY OR SPILL, CONTACT  PHONE NO BYT-887-4048  15 GENERATOR'S CERTIFICATION': I Hereby declare that the contents of this consignment are fully and accurately described above by shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations, and are the same materials previously approved by LEA LAN PRINTED/TYPED NAME  SIGNATURE  16. TRANSPORTER (1) IT. TRANSPORTER (2) NAME:  TEXAS LD NO. IN CASE OF EMERGENCY CONTACT: EMERGENCY PHONE: IS TRANSPORTER (1): Acknowledgment of receipt of material PRINTED/TYPED NAME  SIGNATURE  ADDRESS:  Lea Land, LLC  ADDRESS:  Lea Land, LLC  ADDRESS:  Lea Land, LLC  Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM  PERMIT NO.  20. COMMENTS  AUTHORIZER SIGNATURE  TIME  TIME  TIME  ADDRESS IN TIME  TIME  TIME  TIME  TIME			TALILA			13. WASTE I	PROFILE N	
NAME 15.GENERATOR'S CERTIFICATION: 1 Hereby declare that the contents of this consignment are fully and accurately described above by shipping name and are classified; packed, marked; and labeled, and are in all respects in proper condition for transport by highway-according to applicable international and national government regulations, including applicable state regulations, and are the same materials previously approved by LEA LAN PRINTED/TYPED NAME  SIGNATURE  16. TRANSPORTER (1)  17. TRANSPORTER (2)  NAME:  TEXAS LD. NO.  IN CASE OF EMERGENCY CONTACT  EMERGENCY PHONE:  18. TRANSPORTER (1): Acknowledgment of receipt of material  PRINTED/TYPED NAME  SIGNATURE  19. TRANSPORTER (2): Acknowledgment of receipt of material  PRINTED/TYPED NAME  SIGNATURE  ADDRESS:  Lea Land, LLC  ADDRESS:  Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM  PERMIT NO.  20. COMMENTS  DATE  TIME  AUTHORIZED SIGNATURE  CELL NO.  DATE  TIME  TIME  ADTER  TIME	KOAKING SPRINGS 13 FEDERA	L#4 BATTERY						709
IS GENERATOR'S CERTIFICATION: I Hereby declare that the contents of this consignment are fully and accurately described above by shipping name and are classified; packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations, and are the same materials previously approved by LEA LAN PRINTED/TYPED NAME  SIGNATURE  16. TRANSPORTER (1)  NAME:  LEKE ENVIRONMENTAL, INC  IN CASE OF EMERGENCY CONTACT  EMERGENCY PHONE:  18. TRANSPORTER (1): Acknowledgment of receipt of material  PRINTED/TYPED NAME  SIGNATURE  19. TRANSPORTER (2): Acknowledgment of receipt of material  PRINTED/TYPED NAME  SIGNATURE  19. TRANSPORTER (2): Acknowledgment of receipt of material  PRINTED/TYPED NAME  SIGNATURE  ADDRESS:  Lea Land, LLC  ADDRESS:  ADDRESS:  PHONE:  ADDRESS:  PHONE:  ADDRESS:  PHONE:  ADDRESS:  PHONE:  OCCUMMENTS  20. COMMENTS  PERMIT NO:  WM-01-035 - New Mexico  21. DISPOSAL FACILITY'S CERTIFICATION: 1 Hereby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes.  AUTHORIZER SIGNATURE  CELL NO:  DATE  TIME			ENCY OR SPIL	L, CO	NTACT			
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NAME: ELKE ENVIRONMENTAL, INC.  TEXAS LD: NO.  IN CASE OF EMERGENCY CONTACT: (575) 390-1803  EMERGENCY PHONE: (575) 390-1803  EMERGENCY PHONE: (1): Acknowledgment of receipt of material  PRINTED/TYPED NAME  TOTAL PRINTED/TYPED NAME  ADDRESS: PHONE:  Lea Land, LLC Mile Marker 64, U.S. Hwy 62/180, 505-887-40  30 Miles East of Carlsbad, NM  PERMIT NO.  20 COMMENTS  21 DISPOSAL FACILITY'S CERTIFICATION: 1 Hereby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes.  AUTHORIZED SIGNATURE  CELL NO.  DATE  TIME	16. TRANSPORTER (1	<b>)</b>	17	T	RANSP	ORTER (2)		
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PRINTED/TYPED NAME  SIGNATURE  DATE  T/8, 2009 SIGNATURE  DATE  ADDRESS:  Lea Land, LLC  Mile Marker 64, U.S. Hwy 62/180, 505-887-40 30 Miles East of Carlsbad, NM  PERMIT NO.  WM-01-035 - New Mexico  21 DISPOSAL FACILITY'S CERTIFICATION: 1 Hereby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes.  AUTHORIZED SIGNATURE  PRINTED/TYPED NAME  PRINTED/TYPED NAME  PRINTED/TYPED NAME  COMMENTS  PHONE:  PHONE:  PHONE:  PHONE:  PHONE:  PHONE:  AUTHORIZED SIGNATURE  CELL NO.  DATE  TIME	EMERGENCY PHONE:		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		(2): Acla	nowledgment of	receipt of	material
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	facility is authorized and permitted to receive su	ich wastes.	y certify that the above	c describe	u wastes v	were defineted t	o uns facili	ту, шат гле
18-16-X(1/4(1-1-1))	AUTHORIZED SIGNATURE	1 4+1	CELL NO.		DA	N. A		TIME

### **Analytical Report 322201**

for

Elke Environmental, Inc.

Project Manager: Logan Anderson

Oxy USA

13-JAN-09





12600 West I-20 East Odessa, Texas 79765

Texas certification numbers:
Houston, TX T104704215-08B-TX - Odessa/Midland, TX T104704400-08-TX

Florida certification numbers:

Houston, TX E871002 - Miami, FL E86678 - Tampa, FL E86675 Norcross(Atlanta), GA E87429

> South Carolina certification numbers: Norcross(Atlanta), GA 98015

> North Carolina certification numbers: Norcross(Atlanta), GA 483

Houston - Dallas - San Antonio - Tampa - Miami - Latin America Midland - Corpus Christi - Atlanta







Project Manager: Logan Anderson Elke Environmental, Inc. 4817 Andrews Hwy P.O. Box 14167 Odessa, tx 79768 Odessa, TX 79762

Reference: XENCO Report No: 322201

Oxy USA

Project Address: Roaring Springs 13 # 4 Batt

#### Logan Anderson:

We are reporting to you the results of the analyses performed on the samples received under the project name referenced above and identified with the XENCO Report Number 322201. All results being reported under this Report Number apply to the samples analyzed and properly identified with a Laboratory ID number. Subcontracted analyses are identified in this report with either the NELAC certification number of the subcontract lab in the analyst ID field, or the complete subcontracted report attached to this report.

Unless otherwise noted in a Case Narrative, all data reported in this Analytical Report are in compliance with NELAC standards. Estimation of data uncertainty for this report is found in the quality control section of this report unless otherwise noted. Should insufficient sample be provided to the laboratory to meet the method and NELAC Matrix Duplicate and Matrix Spike requirements, then the data will be analyzed, evaluated and reported using all other available quality control measures.

The validity and integrity of this report will remain intact as long as it is accompanied by this letter and reproduced in full, unless written approval is granted by XENCO Laboratories. This report will be filed for at least 5 years in our archives after which time it will be destroyed without further notice, unless otherwise arranged with you. The samples received, and described as recorded in Report No. 322201 will be filed for 60 days, and after that time they will be properly disposed without further notice, unless otherwise arranged with you. We reserve the right to return to you any unused samples, extracts or solutions related to them if we consider so necessary (e.g., samples identified as hazardous waste, sample sizes exceeding analytical standard practices, controlled substances under regulated protocols, etc).

We thank you for selecting XENCO Laboratories to serve your analytical needs. If you have any questions concerning this report, please feel free to contact us at any time.

Respectfully

Brent Barron, II

Odessa Laboratory Manager

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#### **Sample Cross Reference 322201**



#### Elke Environmental, Inc., Odessa, TX

Oxy USA

Sample Id	Matrix	<b>Date Collected</b>	Sample Depth	Lab Sample Id
SB-2 @ 10'	S	Jan-07-09 10:30	10 ft	322201-001



#### Certificate of Analos Summary 322201

Elke Environmental, Inc., Odessa, TX

Project Name: Oxy USA



Project Id:

Contact: Logan Anderson

Project Location: Roaring Springs 13 # 4 Batt

Date Received in Lab: Fri Jan-09-09 05:02 pm

Report Date: 13-JAN-09

Project Manager: Brent Barron, II

				Project Manager:	Dient Barron, 11	
	Lab Id:	322201-00	)1			
Analysis Requested	Field Id:	SB-2 @ 1	0'			
Analysis Requested	Depth:	10 ft				
	Matrix:	SOIL				
[ <u> </u>	Sampled:	Jan-07-09 10	0:30			
Anions by EPA 300	Extracted:					
]	Analyzed:	Jan-12-09 1	6:19			
	Units/RL:	mg/kg	RL			
Chloride		149	10.4			
Percent Moisture	Extracted:					
	Analyzed:	Jan-12-09 1	1:30			
	Units/RL:	%	RL			
Percent Moisture		3.45	1.00			
TPH By SW8015 Mod	Extracted:	Jan-12-09 13	3:00			
11 = 1 y 2 11 00 10 11 11 00 00 11 11 00 00 11 11	Analyzed:	Jan-12-09 18	3:32			
	Units/RL:	mg/kg	RL			
C6-C12 Gasoline Range Hydrocarbons		ND	15.5			
C12-C28 Diesel Range Hydrocarbons		ND	15.5			
C28-C35 Oil Range Hydrocarbons		ND	15.5			
Total TPH		ND	15.5			_

This analytical report, and the entire data package it represents, has been made for your exclusive and confidential use. The interpretations and results expressed throughout this analytical report represent the best judgment of XENCO Laboratories. XENCO Laboratories assumes no responsibility and makes no warranty to the end use of the data hereby presented. Our liability is limited to the amount invoiced for this work order unless otherwise agreed to in writing.

Since 1990 Houston - Dallas - San Antonio - Austin - Tampa - Miami - Latin America - Atlanta - Corpus Christi

Brent Barron
Odessa Laboratory Director



#### Flagging Criteria



- X In our quality control review of the data a QC deficiency was observed and flagged as noted. MS/MSD recoveries were found to be outside of the laboratory control limits due to possible matrix /chemical interference, or a concentration of target analyte high enough to effect the recovery of the spike concentration. This condition could also effect the relative percent difference in the MS/MSD.
- **B** A target analyte or common laboratory contaminant was identified in the method blank. Its presence indicates possible field or laboratory contamination.
- **D** The sample(s) were diluted due to targets detected over the highest point of the calibration curve, or due to matrix interference. Dilution factors are included in the final results. The result is from a diluted sample.
- E The data exceeds the upper calibration limit; therefore, the concentration is reported as estimated.
- F RPD exceeded lab control limits.
- J The target analyte was positively identified below the MQL and above the SQL.
- U Analyte was not detected.
- L The LCS data for this analytical batch was reported below the laboratory control limits for this analyte. The department supervisor and QA Director reviewed data. The samples were either reanalyzed or flagged as estimated concentrations.
- H The LCS data for this analytical batch was reported above the laboratory control limits. Supporting QC Data were reviewed by the Department Supervisor and QA Director. Data were determined to be valid for reporting.
- K Sample analyzed outside of recommended hold time.
- JN A combination of the "N" and the "J" qualifier. The analysis indicates that the analyte is "tentatively identified" and the associated numerical value may not be consistent with the amount actually present in the environmental sample.
- \* Outside XENCO's scope of NELAC Accreditation.

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9701 Harry Hines Blvd , Dallas, TX 75220	(214) 902 0300	(214) 351-9139
5332 Blackberry Drive, San Antonio TX 78238	(210) 509-3334	(210) 509-3335
2505 North Falkenburg Rd, Tampa, FL 33619	(813) 620-2000	(813) 620-2033
5757 NW 158th St. Miami Lakes, FL 33014	(305) 823-8500	(305) 823-8555
12600 West I-20 East, Odessa, TX 79765	(432) 563-1800	(432) 563-1713
842 Cantwell Lane, Corpus Christi, TX 78408	(361) 884-0371	(361) 884-9116



#### Form 2 - Surrogate Recoveries

Project Name: Oxy USA

Vork Orders: 322201,

Project ID:

Lab Batch #: 746298

Sample: 322199-001 S / MS

Batch:

Matrix: Soil

Units: mg/kg	SU	SURROGATE RECOVERY STUDY						
TPH By SW8015 Mod	Amount Found [A]	True Amount [B]	Recovery %R	Control Limits %R	Flags			
Analytes			[D]					
1-Chlorooctane	119	100	119	70-135				
o-Terphenyl	56.5	50.0	113	70-135	1100			

Lab Batch #: 746298

Sample: 322199-001 SD / MSD

Batch: 1 Matrix: Soil

1

Units: mg/kg	SURROGATE RECOVERY STUDY						
TPH By SW8015 Mod	Amount Found [A]	True Amount [B]	Recovery %R	Control Limits %R	Flags		
Analytes	[-3	-	[D]	, , , ,			
1-Chlorooctane	122	100	122	70-135			
o-Terphenyl	58.6	50.0	117	70-135			

Lab Batch #: 746298

Sample: 322201-001 / SMP

Batch:

Matrix: Soil

Units: mg/kg SURROGATE RECOVERY STUDY TPH By SW8015 Mod Recovery Found Amount Limits Flags %R [B] %R [A] [D]**Analytes** 1-Chlorooctane 97.5 100 98 70-135 o-Terphenyl 49.1 50.0 98 70-135

Lab Batch #: 746298

Sample: 522806-1-BKS/BKS

Batch:

Matrix: Solid

Units: mg/kg	SU	SURROGATE RECOVERY STUDY						
TPH By SW8015 Mod	Amount Found [A]	True Amount [B]	Recovery %R	Control Limits %R	Flags			
Analytes			[D]					
1-Chlorooctane	120	100	120	70-135				
o-Terphenyl	62.2	50.0	124	70-135				

Lab Batch #: 746298

Sample: 522806-1-BLK / BLK

Batch: 1 Matrix: Solid

Units: mg/kg	SU	SURROGATE RECOVERY STUDY								
TPH By SW8015 Mod	Amount Found [A]	True Amount [B]	Recovery %R	Control Limits %R	Flags					
Analytes			[D]							
1-Chlorooctane	101	100	101	70-135						
o-Terphenyl	51.7	50.0	103	70-135						

<sup>\*\*</sup> Surrogates outside limits; data and surrogates confirmed by reanalysis

Surrogate Recovery [D] = 100 \* A / B

All results are based on MDL and validated for QC purposes.

<sup>\*\*\*</sup> Poor recoveries due to dilution



### Form 2 - Surrogate Recoveries

Project Name: Oxy USA

Work Orders: 322201,

Project ID:

Lab Batch #: 746298

Sample: 522806-1-BSD / BSD

Batch:

Matrix: Solid

Units: mg/kg	SURROGATE RECOVERY STUDY								
TPH By SW8015 Mod	Amount Found [A]	True Amount [B]	Recovery %R	Control Limits %R	Flags				
Analytes			[D]						
1-Chlorooctane	117	100	117	70-135					
o-Terphenyl	55.8	50.0	112	70-135					

<sup>\*\*</sup> Surrogates outside limits; data and surrogates confirmed by reanalysis

<sup>\*\*\*</sup> Poor recoveries due to dilution
Surrogate Recovery [D] = 100 \* A / B
All results are based on MDL and validated for QC purposes.



### **Blank Spike Recovery**



Project Name: Oxy USA

ork Order #: 322201

Project ID:

Lab Batch #: 746220

Sample: 746220-1-BKS

Matrix: Solid

Date Analyzed: 01/12/2009

Date Prepared: 01/12/2009

Analyst: LATCOR

Reporting Units: mg/kg	Batch #: 1	BLANK/BLANK SPIKE RECOVERY STUDY						
Anions by EPA 300	Blank Result	Spike Added	Blank Spike	Blank Spike	Control Limits	Flags		
Analytes	[A]	[B]	Result [C]	%R [D]	%R			
Chloride	ND	10.0	9.99	100	90-110			







Project Name: Oxy USA

Work Order #: 322201

Analyst: BHW

Date Prepared: 01/12/2009

Project ID:

Date Analyzed: 01/12/2009

Lab Batch ID: 746298

Sample: 522806-1-BKS

Batch #: 1

Matrix: Solid

Units: mg/kg	BLANK /BLANK SPIKE / BLANK SPIKE DUPLICATE RECOVERY STUDY										
TPH By SW8015 Mod Analytes	Blank Sample Result [A]	Spike Added [B]	Blank Spike Result [C]	Blank Spike %R [D]	Spike Added [E]	Blank Spike Duplicate Result [F]	Blk. Spk Dup. %R [G]	RPD %	Control Limits %R	Control Limits %RPD	Flag
C6-C12 Gasoline Range Hydrocarbons	ND	1000	971	97	1000	950	95	2	70-135	35	
C12-C28 Diesel Range Hydrocarbons	ND	1000	1020	102	1000	997	100	2	70-135	35	

Relative Percent Difference RPD = 200\*|(C-F)/(C+F)|
Blank Spike Recovery [D] = 100\*(C)/[B]
Blank Spike Duplicate Recovery [G] = 100\*(F)/[E]
All results are based on MDL and Validated for QC Purposes



#### Form 3 - MS Recoveries

Project Name: Oxy USA



Work Order #: 322201

Lab Batch #: 746220

⊿ate Analyzed: 01/12/2009

QC-Sample ID: 322199-001 S

Date Prepared:

01/12/2009

Project ID:

Analyst: LATCOR

Batch #:

Matrix: Soil

Reporting Units: mg/kg	MATRIX / MATRIX SPIKE RECOVERY STUDY							
Inorganic Anions by EPA 300  Analytes	Parent Sample Result [A]	Spike Added [B]	Spiked Sample Result [C]	%R [D]	Control Limits %R	Flag		
Chloride	341	205	529	92	80-120			

Matrix Spike Percent Recovery [D] = 100\*(C-A)/B Relative Percent Difference [E] = 200\*(C-A)/(C+B) All Results are based on MDL and Validated for QC Purposes



### Form 3 - NSD Recoveries

Project Name: Oxy USA

Work Order #: 322201

Project ID:

Lab Batch ID: 746298

QC-Sample ID: 322199-001 S

Batch #:

Matrix: Soil

Date Analyzed: 01/13/2009

**Date Prepared:** 01/12/2009

Analyst: BHW

Reporting Units: mg/kg	MATRIX SPIKE / MATRIX SPIKE DUPLICATE RECOVERY STUDY										
TPH By SW8015 Mod	Parent Sample	Spike	Spiked Sample Result	Sample		Duplicate Spiked Sample	Spiked Dup.	RPD	Control Limits	Control Limits	Flag
Analytes	Result [A]	Added [B]	[C]	%R [D]	Added [E]	Result [F]	%R [G]	%	%R	%RPD	
C6-C12 Gasoline Range Hydrocarbons	ND	1030	954	93	1030	974	95	2	70-135	35	
C12-C28 Diesel Range Hydrocarbons	ND	1030	1020	99	1030	1040	101	2	70-135	35	



#### **Sample Duplicate Recovery**





Work Order #: 322201

Lab Batch #: 746220

Date Analyzed: 01/12/2009

QC- Sample ID: 322199-001 D

**Date Prepared:** 01/12/2009

Project Name: Oxy USA

Project ID:

Analyst: LATCOR

Batch #:

Matrix: Soil

Reporting Units: mg/kg	SAMPLE/SAMPLE DUPLICATE RECOVERY								
Anions by EPA 300	Parent Sample Result [A]	Sample Duplicate Result	RPD	Control Limits %RPD	Flag				
Analyte		[B]							
Chloride	341	343	1	20					

Lab Batch #: 746179

Date Analyzed: 01/12/2009

**Date Prepared:** 01/12/2009

Analyst: WRU

QC- Sample ID: 322201-001 D

Batch #:

Matrix: Soil

Reporting Units: %

SAMPLE / SAMPLE DUPLICATE RECOVERY

Percent Moisture  Analyte	Parent Sample Result [A]	Sample Duplicate Result [B]	RPD	Control Limits %RPD	Flag
Percent Moisture	3.45	3,35	3	20	

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Environmental Lab	of Texas			CHAIN ( 12800 West I-20 Eas Odessa, Texas 7876		Phone: Fex:	452-563-1800 432-563-1712	)
Project Manager: Logan Ande	erson				Project	: Нете: <u>Оху</u>	USA	
Company Name Elke Enviro	nmental					ajact #:		
Company Address: P O Box 14	167				Proje	et Loc: Rearing	Springs	13 #4 Batt
City/State/Zip: Odessa, TX	79768					PO #:		
Telephone No: 432-386-00/	13/	F6	ax No: 43	32-366-0884	Report For	met: X Standard	TRAP	NPDES
Sampler Signature:			e-mall: la	eikeenv@yahoo	o.com			
(leb use only)	٦					Anatyz TCLP:	* F 9 G	
ORDER & 322201	<del></del>	,	<del></del>	Preservation & # of Con		TOTAL:	8	
SE S	Beginning Dapth Ending Dapth	Dath Serupted	Time Sempled Tale Filmed Tale Filmed Total 8, of Containers	140, 150 1400, 1800, 1800,	1 (0139)	THE TA 1000 TA 1000 Colors Col	Someratelles BIEX 00X19/5000 or BIEX 8 RC: NO.R.M.	RUSH TAT (Presented)
0\582 @10'	10.	1-7.09 10:3	· A 1	x	1 5 X	IX		X
					<del>╎╎╏╸╸</del> ╁┤			<del>╽</del> ┼┼╂┼┤
		<b></b>	╼╼╄╂┥	<del>┤┤┤┤</del>	<del>╎╏╏╸</del> ┋┼	╌┼┼┼┼	╂╂┼	<del>┞╎╏╏</del>
			-				+++	<del>┋</del>
			-++-	<del>┤┤┤┤</del>	┼┼╂╴╴╂┼	╼┼┼┼┼┼		
8 pacial instructions:		$\sim$				Laboratory Comme Sample Containers & VOCs Free of Heads	inte: intact? space?	(P) N
Retrigifished by	909 2:05P	Received by:  Received by:  Reserved by ELOT:	Japa	nf	Data   Time	Custody seeks on on Custody seeks on on	s) rdeiner(s) ofer(s) red I Rep. 7 UPB DHIL	Y N N N N N N N N N N N N N N N N N N N
Surfree St.	111/4	77.4.4	Post N.		1 (97) 11:0	7- Temperature Upon F	teceint:	τς <sub>α</sub> , Ι

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#### **Environmental Lab of Texas**

Variance/ Corrective Action R	leport- Sample	Log-In	
ent: <u>EIKE ENV.</u>			
(e/ Time: \ \ 9 \ 09 \ \ \ \ \ \ \ \ \ \ \ \ \ \			
37.7201			
uals: CIL			
Sample Recei	pt Checklist		<b>-</b>
Temperature of container/ cooler?	Yes	No	Client Initials
Shipping container in good condition?	(Yes)	No	
Custody Seals intact on shipping container/ cooler?	Yes	No	Not Present
Custody Seats intact on sample bottles/ container?	(06	No	Not Present
Chain of Custody present?	Ves	No	
Sample instructions complete of Chain of Custody?	Yes	No	
Chain of Custody signed when relinquished/ received?	(Yes	No	
Chain of Custody agrees with sample label(s)?	Yes	No	ID written on Cont./ Lid
Container label(s) legible and intact?	Yes	No	Not Applicable
O Sample matrix/ properties agree with Chain of Custody?	Yes	No	
11 Containers supplied by ELOT?	Yes	No	
2 Samples in proper container/ bottle?	Yes	No	See Below
3 Samples properly preserved?	Yes	No	See Below
14 Sample bottles intact?	(Yes	No	
15 Preservations documented on Chain of Custody?	(Yes	No	† · · · · · · · · · · · · · · · · · · ·
16 Containers documented on Chain of Custody?	Yes	No	
17 Sufficient sample amount for indicated test(s)?	Yes	No	See Below
18 All samples received within sufficient hold time?	Yes)	No	See Below -
19 Subcontract of sample(s)?	Yes	No	Not Applicable
20 VOC samples have zero headspace?	Yes	No	Not Applicable
Variance Do		1.10	1. Harrophicable
Contacted by:	<del></del>	_	Date/ Time:
legarding:			·
			· · · · · · · · · · · · · · · · · · ·
Corrective Action Taken:			
Client understands and	would like to pro		
Cooling process had be	gun shortly after	samplin	g event

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

Attach Additional Sheets If Necessary

## State of New Mexico Energy Minerals and Natural Resources , IAN $0.5\,7009$

N 05 7009 Form C-141 Revised October 10, 2003

Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505 Submit 2 Copies to appropriate
District Office in accordance
with Rule 116 on back
side of form

Release Notification and Corrective Action												
h9EB19C	06552	84	•			<b>OPERA</b>	TOR	Ø	Initi	al Report	☐ Fin	al Report
Name of Co	mpany O	XY USA		19246		Contact Ke						
		Carlsbad, NM					No. (O) 575-887					
Facility Nar	ne Roarii	ng Springs 1:	3-4 5 <b>E</b> ZSZ	DAL COLL		Facility Typ	e Well with Pro	oduced Wa	ter Ta	nk		
Surface Ow		* KING 7 C	11616	Mineral (	)wner B	LM		L	ease l	No.		
3001	5293	50		LOCA	ATION	OF REI	LEASE					
Unit Letter	Section	Township	Range	Feet from the	North/	South Line	Feet from the	East/West	Line			
С	13	218	23E		<u> </u>			<u> </u>		Eddy		
			La	titude		Longitud	e					
	NATURE OF RELEASE											
Type of Rele	ase Produc	ed Water				<del></del>	Release 50bbls	Vo	lume I	Recovered	45bbls	
Source of Release Transfer Pump						1	lour of Occurrenc			Hour of Dis	covery	
Was Immediate Notice Given?					<del> </del>	NA If VES To	Whom? Sharm			@ 3:40pm	RIM	
Was Immediate Notice Given?  ☐ Yes ☐ No ☐ Not Required  If YES, To Whom? Sherry Bohnam-NMOCD, Jim Amos-BLM												
By Whom?							lour See above					
Was a Water	course Read		Yes 🔯	i No		If YES, Vo	lume Impacting t	he Watercou	irse.			
IC a Waterson				_		<u></u>						
If a Watercou	irse was im	pacted, Descri	be runy.	•								
												1
												1
Describe Cau	se of Proble	em and Reme	lial Action	n Taken.*							<del></del>	
A plug in the	transfer pu	mp blew out o	ausing pro	oduced water to le	eak. Av	ac-truck was	called and was in	the area and	d all fl	uid was pick	æd up.	1
		and Cleanup A										
				site will be deline	ated to d	letermine the	extent of the cont	tamination.	A wor	k plan will t	hen be subn	itted
tor approvat t	o the BLM	and NMOCD	•									1
												1
I hereby certi	fy that the i	nformation gi	ven above	is true and comp	lete to th	e best of my	knowledge and u	nderstand th	at pur	suant to NM	OCD rules a	nd
regulations al	l operators	are required to	report an	nd/or file certain r	elease no	otifications ar	nd perform correc	tive actions	for rel	eases which	may endang	ger [
public health	or the envir	ronment. The	acceptanc	e of a C-141 repo	ort by the	NMOCD m	arked as "Final R	eport" does i	not rel	ieve the oper	rator of liab	lity
or the environ	perations nument. In a	ave tanea to a ddition. NMO	aequatery CD accen	investigate and retance of a C-141	emediate report de	e contamination	on that pose a three the operator of a	eat to ground resnonsibilit	d water	r, surface wa compliance v	iter, human vith any othe	health
federal, state,											,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	A.	XX			1		OIL CONS	SERVAT	<u>ION</u>	DIVISIO	<u>N</u>	
Signature:	Za	$\mathcal{X}\mathcal{Y}$		6					:	Remediation	Actions to be c	ompleted and
						Approved by	District Supervise	or:		Final C-141	submitted with	confirmation
Printed Name	: Kelton Be	eaird		<del></del>				Tam	dad	Expiration D	ate.	o. Delote the
Title: HES S	pecialist			·	/	Approval Date	e: 1-6-09	Expir	ration	Dale 3	6-00	
E-mail Addres	ser kelton i	heaird@ovy.c	om			Conditions of	Annroval-		-	]		
~- man Audic	os. RVIIVII	Community.	<u> </u>				Approvai. SEE ATTACH!	ED		Attached		
Date: 12-30-0	)8	. 703					STIPULATION			128	P-20	12

Notify OCD 48 hours prior to obtaining samples where analyses are to be presented to OCD

District I 1625 N. French Dr., Hobbs, NM 88240 District II 1301 W. Grand Avenue, Artesia, NM 88210 District III

Rio Brazos Road, Aztec, NM 87410

t IV

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

Form C-141 Revised October 10, 2003

Submit 2 Copies to appropriate District Office in accordance with Rule 116 on back side of form

#### **Release Notification and Corrective Action**

						OPERATOR			☐ Initial Report ☐ Final Report				
Name of Company – Oxy USA						Contact - Kelton Beaird							
Address – P O Box 1988 Carlsbad, NM 88220						Telephone No. – off 575-628-4121 cell 575-390-1903							
Facility Name – Roaring Springs 13 Fed #4						Facility Type – Well with Produced Water Tank							
Surface Owner - BLM Mineral Owner -						- BLM Lease				No. 30-015-29350			
				LOCA	TIO	N OF REI	EASE						
Unit Letter	Section	Township	Range			/South Line	Feet from the	East/W	est Line	County			
С	13	218	23E						:	Eddy			
Latitude 32° 29.038' N Longitude 104° 33.513' W													
NATURE OF RELEASE													
Type of Release – Produced Water							Volume of Release 50bbls Volume Recovered – 45 bbls						
Source of Release – Transfer Pump						Date and Hour of Occurrence  N/A  Date and Hour of Discovery  12-29-09 @ 3:40pm							
Was Immediate Notice Given?						N/A 12-29-09 @ 3:40pm If YES, To Whom? Sherry Bohnam (NMOCD)							
☐ Yes ☐ No ☐ Not Required													
By Whom? Kelton Beaird – HES Oxy						Date and Hour - See above							
Was a Watercourse Reached?						If YES, Volume Impacting the Watercourse.							
☐ Yes ⊠ No													
Watercourse was Impacted, Describe Fully.*													
Describe Cause of Broklem and Bernedial Action Taken * A plug in the transfer was blanked as a least A section to the													
Describe Cause of Problem and Remedial Action Taken.* A plug in the transfer pump blew out causing produced water to leak. A vac-truck was in the area and all fluid was picked up. Area affected was contained inside the berm. A vertical and horizontal delineation was completed using an air rotary rig.													
A borehole was drilled at the site to determine groundwater. The borehole was drilled to 96' deep and a hard rock layer was encountered that was													
impenetrable by the drill rig. No water bearing formations were found to 96' deep.													
				ken.* As per the a									
			n native so	oil was hauled back	to the	site. The exc	avation was back	filled wi	th the clea	n native soi	l and n	ew berms	
were built are	ound the ba	ittery.											
I hereby certify that the information given above is true and complete to the best of my knowledge and understand that pursuant to NMOCD 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 NMOCD marked as "Final Report" does not relieve the operator of liability													
should their	operations l	have failed to	adequatel	y investigate and re	emedia	te contaminat	ion that pose a thr	eat to gr	ound wate	r, surface w	ater, hu	ıman health	
should their operations have failed to adequately investigate and remediate contamination that pose a threat to ground water, surface water, human health or the environment. In addition, NMOCD 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.													
1/ A & / 11						OIL CONSERVATION DIVISION							
Signature:													
Printed Name: Kelton Beaird							Approved by District Supervisor:						
							Anneyel Deter			Projection Date:			
Title: HES Specialist							Approval Date:			Expiration Date:			
mail Address: kelton_beaird@oxy.com						Conditions of Approval:				Attached			
Date: 7-13-0	)9		Phone:	575-628-4121									
<u> </u>		ets If Necess	****	······································						•			