State of New Mexico Energy Minerals and Natural Resources

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												
						OPERATOR Initial I					Final Report	
Name of Company - Texas ReExploration Operating LC						Contact - Dean Brooks						
Address –One Petroleum Center, 3300 North A., Bldg.1-234, Midland, TX 79707						Telephone No. 432-432-618-2202						
Facility Name - Chalupa SWD #004						Facility Type - Injection						
Surface Owner - ????? STATE OF NM Mineral Owner						- <u></u>				NoLG 2414		
7						ON OF RELEASE 3			30.	025-	29184	
Unit Letter				South				Vest Line				
M	13					Line	220					
	1]	Latitude_33.1		Longitude			THIS I	LUMBET	bbls	
Type of Rele	ase - Produ	iced Water/Si			Volume of Release – estimated Volume			Volume	Recovered - 0	bbls		
					20bbls							
Source of Re					Date and Hour of Occurrence ? Date and Hour of Discovery 8/8/07 If YES, To Whom?							
Was Immediate Notice Given?												
By Whom?						Date and Hour						
Was a Water	course Rea		7		If YES, Volume Impacting the Watercourse.							
If a Watercourse was Impacted, Describe Fully.*												
Describe Cause of Problem and Remedial Action Taken.* A flow line connection/union was replaced which later developed into a leak resulting in the brine water spill. The leak has been properly repaired. No remedial action has been taken yet. A remediation plan has been compiled and will be implemented upon NMOCD approval. Please see attached Remediation Action Plan. Describe Area Affected and Cleanup Action Taken.* The approximate area effected is 150ft X 180ft. Vegetation shows signs of stress within approximately 50% of the contaminated area. The entire area indicating elevated levels of chlorides will be remediated. The choice of remediation is to remove contaminated soil to a locally approved disposal site (Forte – Rancher ????????) C NOT A DISPOSAL 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 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.												
						DENTEQUER			VATION DIVISION			
Signature:			•	- M					G	lohur	Son	
Printed Name: Dean Brooks						Approvent by District Supervisor: ENVIRC			VIRON	MENTAL ENGINEER		
Title: Vice President of Engineering						ApprecaDDate: 9.77.07 Expiration Date:						
E-mail Addre	ess: dbrook	s@tex-rex.co	<u>m</u> _		$\left \right $	Conditions o	f Approval:			Attached		
Date: 9/12/0		4. 16NI		432-618-2202	┦──┴							
Attach Addi	NAC SI	GNATUE	er Re	QUIRED	/					RP	#1597	