

Received 11/2/2015

NMOCD Artesia

Form C-141

Revised August 8, 2011

District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 S. First St., 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

Submit 1 Copy to appropriate District Office in
accordance with 19.15.29 NMAC.

Release Notification and Corrective Action

OPERATOR

☐ Initial Report ☒ Final Report

| | |
|--|---|
| Name of Company: BOPCO, L.P. | Contact: Bradley Blevins |
| Address: 522 W. Mermod, Suite 704 Carlsbad, N.M. 88220 | Telephone No. 575-887-7329 |
| Facility Name: PLU #423H Lact Unit; 2RP# 3049 | Facility Type: Exploration and Production |

| | | |
|------------------------|------------------------|----------------------|
| Surface Owner: Federal | Mineral Owner: Federal | API No. 30-015-40710 |
|------------------------|------------------------|----------------------|

LOCATION OF RELEASE

| | | | | | | | | |
|------------------|---------------|-----------------|--------------|-----------------------|---------------------------|----------------------|------------------------|----------------|
| Unit Letter I | Section 19 | Township 25S | Range 30E | Feet from the 1750 | North/South Line South | Feet from the 880 | East/West Line East | County Eddy |
|------------------|---------------|-----------------|--------------|-----------------------|---------------------------|----------------------|------------------------|----------------|

Latitude: N 32.113042° Longitude: W 103.914955°

NATURE OF RELEASE

| | | |
|--|---|--|
| Type of Release: crude oil | Volume of Release: 6 bbls | Volume Recovered: 1 bbl |
| Source of Release: Lact Unit | Date and Hour of Occurrence: 6/3/15 @ unknown | Date and Hour of Discovery: 6/3/15 @ 4 pm |
| Was Immediate Notice Given? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Required | If YES, To Whom? N/A | |
| By Whom? N/A | Date and Hour: N/A | |
| Was a Watercourse Reached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If YES, Volume Impacting the Watercourse: Not Applicable | |

If a Watercourse was Impacted, Describe Fully.* Not Applicable

Describe Cause of Problem and Remedial Action Taken.*


Air eliminator on battery LACT unit failed and oil was released. Standing fluids were recovered. Air eliminator was repaired.

Describe Area Affected and Cleanup Action Taken.*

Leak affected approximately 480 square feet of well pad. Samples were collected and sent to Cardinal Labs to be tested. Based on analytical data and NMOCD approval the contaminated soil has been excavated and hauled to a state approved disposal facility, and the excavation backfilled with clean soil.

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.

OIL CONSERVATION DIVISION

| | | |
|--|---------------------------------------|-----------------------------------|
| Signature:  | Approved by Environmental Specialist: | |
| Printed Name: Bradley Blevins | Approval Date: 11/3/2015 | Expiration Date: N/A |
| Title: Assistant Remediation Foreman | Conditions of Approval: | |
| E-mail Address: bblevins@basspet.com | FINAL | Attached <input type="checkbox"/> |
| Date: 11-2-15 Phone: 432-214-3704 | | |

* Attach Additional Sheets If Necessary

2RP-3049