District I - (505) 393-6161 P.O. Box 1980 Hobbs, NM 88241-1980 District II - (505) 748-1283 1301 W. Grand Ave. Artesia, NM 88210 District III - (505) 334-6178 1000 Rio Brazos Road Aztec, NM 87410 District IV - (505) 827-7131

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BLM

Unit Lett F

## State of New Mexico

Form C-141 Originated 2/13/97

Energy Mineral and Natural Resources Departn	nent				
Oil Conservation Division					
1220 South St. Francis Drive					
Santa Fe, New Mexico 87505					

(505) 476-3440

Submit 2 copies to Appropriate District Office in accordance with Rule 116 on back side of form

30-015-28813 MLB 0510845139	Release Notificatio	on and Corrective Action	Initial Report	Final Report
Name		Contact		
Marathon Oil Company		Jerry Har	rison - Production Sup	ervisor
Address		Telephone No.		
P.O. Box 1324, Artesia NM 88211		505-457-2621		RECEIVED
Facility Name		Facility Type		
Station 133		Production Facility	<u> </u>	FEB 2 3 2005
				000
Surface Owner	Mineral Owner		Lease No.	
BLM	BLM		NM07260	

					the second s				
	LOCATION OF RELEASE								
ər	Section	Township	Range	Feet from the	North/South Line	Feet from the	East/West Line	Count	
	33	215	24E	lo	0	l o	l o	ļ	

F	33	21S	24E	0	00	0	0	Edd	ly
				NAT	<b>URE OF RE</b>	LEASE			
Type of Release						Volume of Release		Volume Recovered	
Produced water				1240		391.8			
Source of Rel	ease					Date of Occurrence	Hour of Occurrence	Date of Discovery	Hour of Discovery
Hole in bu	ried plast	tic coated	steel flow	/ line.		02/11/05	12:00 AM	02/11/05	9:00 AM
Was Immediate Notice Given?				If YES, To Whom?					
		Y	es 🖵	NoN	lot Required	Mike Bratcher			
By Whom?						Date of No	tification	Hour of N	otification
Bob Coleman						02/11/05 11:04 AM			
Vec No.						If YES, Volume Impacting the Watercourse.			
						Less than 848 Bbl. No surface water was present or impacted.			

If a watercourse was Impacted, Describe Fully. (Attach Additional Sheets If Necessary)

Produced fluids ran off into the canyon to the north east, traveling approximately 1000 feet from the location along the rocky bottom.

Describe Cause of Problem and Remedial Action Taken. (Attach Additional Sheets if Necessary)

Corrosion caused a hole in a buried 4" flow line. The pipe was replaced, and run on top of the ground to allow better inspection. Other facilites in this area with similar construction and age are also being inspected.

Describe Area Affected and Cleanup Action Taken. (Attach Additional Sheets if Necessary)

This location is on a hill top. The terrain is layered limestone with a thin soil covering. This location is diked, but the water over ran the dike at the north corner and flowed into the canyon to the north and east. It ran a total of approximately 1000 feet from the well pad along the canyon's bottom. Review of water data from the NM State Engineer's office does not show any water wells in this section, the nearest being in section 28 to the north at a depth of 83 feet. There are no bodies of surface water within 1000 feet. Free standing fluid was recovered by vacuum truck and disposed of in our Indian Hills SWD.

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 regulation 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 thread 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.

Signature: Allalun					
Printed Name: RV Coleman	Approved by by MB				
Title: Operations Superintendent	Approval Date: 4/18/05 Expiratio	n Date: H/H			
Date: Phone:	Conditions of Approval:	Attached			
2-22-05 (505) 457-2621	Find Approved by RCM				

on completion of this form, return to the instructions Workbook