Ulosea-	Loop System Permit or Closure Plan Ap	plication	
District I	State of New Mexico	Form C-144 CLEZ	
1625 N. French Dr., Hobbs, NM 88240 District II	Energy Minerals and Natural Resources	July 21, 2008	
1301 W. Grand Avenue, Artesia, NM 88210 District III	Department Oil Conservation Division	For closed-loop systems that only use above ground steel tanks or haul-off bins and propose	
1000 Rio Brazos Road, Aztec, NM 87410 District IV	1220 South St. Francis Dr.	to implement waste removal for closure, submit to the appropriate NMOCD District Office.	
1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa Fe, NM 87505	to the appropriate NMOCD District Office.	
(that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure)			
Type of action: Dermit Closure			
	C-144 CLEZ) per individual closed-loop system request		
Please be advised that approval of this request does not reli	tanks or haul-off bins and propose to implement waste eve the operator of liability should operations result in pollut omply with any other applicable governmental authority's rul	tion of surface water, ground water or the environment. Nor	
1. Operator: <u>LRE OPERATING, LLC</u>	OGRID #:28199	94	
Address:c/o Mike Pippin LLC, 3104 N. Sullivan, Farmington, NM 87401			
Facility or well name: WILLIAMS B FEDERAL #6			
API Number: <u>30-015-35900</u>	OCD Permit Number:214	4008	
U/L or Qtr/Qtr <u>G</u> Section <u>29</u> Township <u>17-S</u> Range <u>28-E</u> County: <u>EDDY</u>			
Center of Proposed Design: Latitude	Longitude	NAD: 1927 1983	
Surface Owner: 🛛 Federal 🗌 State 🗋 Private 🗖] Tribal Trust or Indian Allotment		
2.			
Closed-loop System: Subsection H of 19.15.	17.11 NMAC		
Operation: 🔲 Drilling a new well 🔀 Workover o	r Drilling (Applies to activities which require prior ap	pproval of a permit or notice of intent) P&A	
Above Ground Steel Tanks or Haul-off Bins	;		
3.			
Signs: Subsection C of 19.15.17.11 NMAC	ne site location and emergency telephone numbers		
 12"x 24", 2" lettering, providing Operator's name, site location, and emergency telephone numbers Signed in compliance with 19.15.3.103 NMAC 			
Closed-loop Systems Permit Application Attachment Checklist: Subsection B of 19.15.17.9 NMAC Instructions: Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the documents are			
attached.		,	
 Design Plan - based upon the appropriate requirements of 19.15.17.11 NMAC Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC 			
Closure Plan (Please complete Box 5) - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC			
Previously Approved Design (attach copy of design)	API Number:		
Previously Approved Operating and Maintenance Pla	n API Number:		
5. <u>Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only</u> : (19.15.17.13.D NMAC) Instructions: Please indentify the facility or facilities for the disposal of liquids, drilling fluids and drill cuttings. Use attachment if more than two facilities are required.			
Disposal Facility Name:	Disposal Facility Permit	Number:	
Disposal Facility Name:	Disposal Facility Per	mit Number:	
Will any of the proposed closed-loop system operations and associated activities occur on or in areas that <i>will not</i> be used for future service and operations? Yes (If yes, please provide the information below) No			
Required for impacted areas which will not be used for future service and operations: Soil Backfill and Cover Design Specifications based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC Re-vegetation Plan - based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC			
6. Operator Application Certification:			
I hereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief.			
Name (Print):	Title:	_	
Signature:	Date:		
e-mail address: Telephone:			

7. <u>OCD Approval:</u> Permit Application (including closure plan) 🔀 C		
OCD Representative Signature:	Approval Date: <u>4/1/13</u>	
OCD Representative Signature:ADode Title: Dist & Syse	OCD Permit Number:14008	
8. <u>Closure Report (required within 60 days of closure completion)</u> : Subsection K of 19.15.17.13 NMAC Instructions: Operators are required to obtain an approved closure plan prior to implementing any closure activities and submitting the closure report. The closure report is required to be submitted to the division within 60 days of the completion of the closure activities. Please do not complete this section of the form until an approved closure plan has been obtained and the closure activities have been completed.		
	Closure Completion Date: <u>3/14/13</u>	
Instructions: Please indentify the facility or facilities for where the lique two facilities were utilized.	Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only: uids, drilling fluids and drill cuttings were disposed. Use attachment if more than Disposal Facility Permit Number: R-9166	
Disposal Facility Name: <u>CRI (Controlled Recovery Inc.)</u> Disposal Facility Name: <u>Westall Loco Hills Water Disposal</u>	Disposal Facility Permit Number: <u>R-9166</u>	
Were the closed-loop system operations and associated activities perform Yes (If yes, please demonstrate compliance to the items below)	ned on or in areas that will not be used for future service and operations?	
Required for impacted areas which will not be used for future service and operations: Site Reclamation (Photo Documentation) Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique		
^{10.} <u>Operator Closure Certification</u> : I hereby certify that the information and attachments submitted with this belief. I also certify that the closure complies with all applicable closure	closure report is true, accurate and complete to the best of my knowledge and requirements and conditions specified in the approved closure plan.	
Name (Print):Mike Pippin	Title: Petroleum Engineer - Agent	
Signature: Mile Pippin	Date: <u>March 15, 2013</u>	
e-mail address:mike@pippinllc.com	Telephone: 505-327-4573	

LRE OPERATING, LLC <u>PIT CLOSURE</u>

CLOSURE:

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During workover operations, all solids and cuttings were hauled off by CLS to their disposal facility, Permit #R-9166.

All liquids were hauled to Westall Loco Hills Water Disposal. Permit #R-3221. The closed loop equipment was inspected daily by the rig crew. There were no leaks or spills during the workover operations. The closed-loop system was on the wellpad.