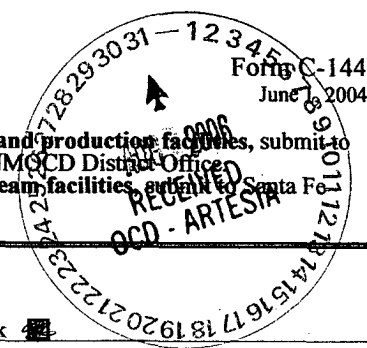


District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Avenue, Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy Minerals and Natural Resources

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

For drilling and production facilities, submit to appropriate NMOC District Office.
For downstream facilities, submit to Santa Fe office.



Pit or Below-Grade Tank Registration or Closure

Is pit or below-grade tank covered by a "general plan"? Yes ☒ No ☐
Type of action: Registration of a pit or below-grade tank ☐ Closure of a pit or below-grade tank ☒

Operator: ASPEN OIL, INC.		Telephone: (505) 392-2277		e-mail address: aspenoil@valornet.com	
Address: P. O. BOX 2674, HOBBS, NM 88241-2674					
Facility or well name: <u>Delphi #3</u>		API #: <u>30-015-01217</u>		U/L or Qtr/Qtr <u>L</u> Sec <u>36</u> T <u>17S</u> R <u>27E</u>	
County: <u>Eddy</u>		Latitude		Longitude	
Surface Owner: Federal <input type="checkbox"/> State <input checked="" type="checkbox"/> Private <input type="checkbox"/> Indian <input type="checkbox"/>		NAD: 1927		1983	
Pit Type: Drilling <input type="checkbox"/> Production <input type="checkbox"/> Disposal <input type="checkbox"/> <input checked="" type="checkbox"/> Workover <input type="checkbox"/> Emergency <input type="checkbox"/> <input checked="" type="checkbox"/> Lined <input type="checkbox"/> Unlined Liner type: Synthetic <input type="checkbox"/> Thickness <u>12</u> mil Clay <input type="checkbox"/> Pit Volume <u>100</u> bbl		Below-grade tank Volume: <u>100</u> bbl Type of fluid: <u>Oil</u> Construction material: <u>Double-walled, with leak detection?</u> Yes <input type="checkbox"/> If not, explain why not. Less than 50 feet (20 points) 50 feet or more, but less than 100 feet (10 points) <u>100 feet or more</u> (0 points) Yes (20 points) <u>No</u> (0 points) Less than 200 feet (20 points) <u>200 feet or more, but less than 1000 feet</u> (10 points) <u>1000 feet or more</u> (0 points) Ranking Score (Total Points) <u>0</u>			
Depth to ground water (vertical distance from bottom of pit to seasonal high water elevation of ground water.)					
Wellhead protection area: (Less than 200 feet from a private domestic water source, or less than 1000 feet from all other water sources.)					
Distance to surface water: (horizontal distance to all wetlands, playas, irrigation canals, ditches, and perennial and ephemeral watercourses.)					

If this is a pit closure: (1) Attach a diagram of the facility showing the pit's relationship to other equipment and tanks. (2) Indicate disposal location: (check the onsite box if you are burying in place) ☒ onsite ☐ offsite If offsite, name of facility _____ (3) Attach a general description of remedial action taken including remediation start date and end date. (4) Groundwater encountered: ☒ No ☐ Yes If yes, show depth below ground surface _____ ft. and attach sample results.

(5) Attach soil sample results and a diagram of sample locations and excavations.

Additional Comments: Closure will be 1st or 2nd wk of September.
Take down fence, Remove all foreign material, Fold 12 mil liner to center of pit, Place 20 mil cap (10' x 25') as to isolate and encapsulate all cuttings from water or erosion cover w/ 3' of soil and natural topsoil.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that the above-described pit or below-grade tank has been/will be constructed or closed according to NMOC guidelines, a general permit, or an (attached) alternative OCD-approved plan.

Date: 8/28/06
Printed Name/Title: Larry Barnett Signature: Larry Barnett - President
Your certification and NMOC approval of this application/closure does not relieve the operator of liability should the contents of the pit or tank contaminate ground water or otherwise endanger public health or the environment. Nor does it relieve the operator of its responsibility for compliance with any other federal, state, or local laws and/or regulations.

Approval: Jim W. Green
Printed Name/Title: District II Supervisor Signature: _____ Date: 9/1/06