District I 1625 N French Dr., Hobbs, NM 8 District II 1301 W. Grand Avenue, Artesia, District III 1000 R10 Brazos Road, Aztec, NM 8 District IV 1220 S St Francis Dr., Santa Fe, NM 8750

# State of New Mexico Energy Minerals and Natural Resources

Form C-101 May 27, 2004

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

Submit to appropriate District Office ☐ AMENDED REPORT

APPL	ICATI(	ON F		R PERMIT			E-ENT!	ER, DI	EEPEI	N, PLUGB				<u> </u>
				Operator Name		•					<sup>2</sup> OC	GRID Numbe	r	,
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	BOPE PROGRAM: A 5000# BOPE will be installed on the 9 5/8" H2S CONTINGENCY PLAN ATTACHED.							.5		·-y ·				
				1										
23 I hereby certify that the information given above is true and complete to the best of my knowledge and belief-tourther certify that the drilling pit will be						e		OIL C	CONSERVA	ATIO1	N DIVIS	ION		
constructed according to N/IOCD guidelines $\square$ , a general permit $\boxtimes$ , or an (attached) alternative QCD-approved plan $\square$ .						ii ii	oved by:							
Signature:		1	Y	1/d						BRYAN	G. AJ	RRANT		
Printed name	Cy Cowai		<del>]</del>	V 4			Title:			DISTRIC	CTII	GEOLO	GIST	
Title. Regula	itory Agent						Appr	oval Date.	AUG 2	2 0 2007	Expira	tion Date:	AUG 2 0 2	200 <b>8</b>
E-mail Addre	ess cy@ypc	nm con	n						E 117	- ×				
Date: 8/13/0	7			Phone: (505)	748-4371	)	Cond	itions of A	nnroval A	Attached [				

/District I

1625 N. French Dr., Hobbs, NM 88240

District II

1301 W. Grand Avenue, Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

12 Dedicated Acres

320 W/2

<sup>3</sup> Joint or Infill

<sup>4</sup> Consolidation Code

1220 S. St. Francis Dr., Santa Fe, NM 87505

# State of New Mexico

Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.

Santa Fe, NM 87505

Form C-102

Revised October 12, 2005

Submit to Appropriate District Office

State Lease - 4 Copies Fee Lease - 3 Copies

☐ AMENDED REPORT

### WELL LOCATION AND ACREAGE DEDICATION PLAT

'API Number			ı	<sup>2</sup> Pool Code			3 Pool Name			
							Wildcat Ches	ster (Mississippi	an)	
4 Property	Code		<sup>5</sup> Property Name						<sup>6</sup> Well Number	
3414	8			1	CLARENCE	BCU			5	
7 OGRID	No.				<sup>8</sup> Operator N	ame			Elevation	
02557	75	YATES PETROLEUM CORPORATION							3327'	
					<sup>10</sup> Surface I	ocation				
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County	
N	11	16S   26E     660   SOUTH   1980   WES						WEST	EDDY	
			<sup>11</sup> Bot	ttom Hol	e Location If	Different From	Surface			
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County	

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

<sup>5</sup> Order No.

FEE  I hereby certify that the information contained herein is true and complete to the best of my knowledge and batef, and that this organization either owns a working interest or unleased merest in the load including the proposal bottom hole location or has a right to that that location pursuant to a contract with an owner of such a mineral or working interest, or to prefit that you produced on the contract with an owner of such a mineral or working interest, or to prefit that you for the production of the pr				· · · · · · · · · · · · · · · · · · ·	
FEE  to the heat of my knowledge and belief, and that this organization either owns a working interest or wilcased marerial interest in the land archafung the proposed bottom hole location more at right to drift that well at that location pursuant to a contract with an owner of such a more all or working interest, or to a computery pooling order headfolders fluered by the draftom  Signature  Date  Cy Cowan  Printed Name  Regulatory Agent Tule  18 SURVEYOR CERTIFICATION  I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.  Date of Survey  Signature and Seal of Professional Surveyor REFER TO ORIGINAL PLAT	H		4 6		<sup>17</sup> OPERATOR CERTIFICATION
FEE  owns a working universit or unleased immeral interest in the land including the proposed bottom hole location or has a right to brill that well at this location pursuant to a contract with an owner of such a mineral or working universe, to go configure policies on a computation yopoling order ment or a computation yopoling order has mineral or working universe, to go configure policies of the hospital policies of a computation yopoling order has policies for the hospital policies of a computation yopoling order has policies for the hospital policies of a computation you will be a support of the hospital policies of a computation you will be a support of the hospital policies of a computation you will be a support of the hospital policies of a computation you will be a support of the hospital policies of a computation you will be a support of the hospital policies of a computation you will be a support of the hospital you will be a support of the professional surveys and the young will be a support of the professional surveys or support of the professional survey					I hereby certify that the information contained herein is true and complete
the proposed bottom hole location or has a right to drill this well at the location pursuant to a contract with an owner of such a mineral or working interest, or to profit pury pooling algement or a compulsory pooling order headofire-filtered by the day from  Stignature  Date  CY Cowan  Printed Name  Resultatory Asent  Iste  Is SURVEYOR CERTIFICATION  I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.  Date of Survey  Signature and Seal of Professional Surveyor REFER TO ORIGINAL PLAT					to the best of my knowledge and belief, and that this organization either
I location pursuant to a contract with an owner of such a mineral or working interest, or to gettlytary pooling adjectment or a compulsory pooling order beythofore glared by th daylon  Signature Date  Cy Cowan  Printed Name  Regulatory Agent Title  I SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.  Date of Survey Signature and Seal of Professional Surveyor REFER TO ORIGINAL PLAT		FEE			owns a working interest or unleased mineral interest in the land including
HEE  Interest, or to gettinutary pooling for geomen or a compulsory pooling order headsfort fluered by the days on the professional Surveys  Signature  Date  Cy Cowan  Printed Name  Regulatory Agent Title  Is SURVEYOR CERTIFICATION  I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.  Date of Survey  Signature and Seal of Professional Surveyor REFER TO ORIGINAL PLAT					the proposed bottom hole location or has a right to drill this well at this
FEE    Signature   Date		The state of the s			1
Signature  Date  Cy Cowan Printed Name  Regulatory Agent Title  18 SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.  Date of Survey  Signature and Seal of Professional Surveyor REFER TO ORIGINAL PLAT					interest, or to a collustary pooling agreement or a compulsory pooling
FEE    SURVEYOR CERTIFICATION   I hereby certify that the well location shown on this   plat was plotted from field notes of actual surveys   made by me or under my supervision, and that the   same is true and correct to the best of my belief.    Date of Survey   Signature and Seal of Professional Surveyor   REFER TO ORIGINAL PLAT					order heretofore ontered by the division
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FEE  I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.  Date of Survey  Signature and Seal of Professional Surveyor REFER TO ORIGINAL PLAT					180
Plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.  Date of Survey  Signature and Seal of Professional Surveyor  REFER TO ORIGINAL PLAT					
made by me or under my supervision, and that the same is true and correct to the best of my belief.  Date of Survey Signature and Seal of Professional Surveyor REFER TO ORIGINAL PLAT		TOTAL			I hereby certify that the well location shown on this
Same is true and correct to the best of my belief.  Date of Survey Signature and Seal of Professional Surveyor REFER TO ORIGINAL PLAT		ree			plat was plotted from field notes of actual surveys
Date of Survey Signature and Seal of Professional Surveyor REFER TO ORIGINAL PLAT					made by me or under my supervision, and that the
Date of Survey Signature and Seal of Professional Surveyor REFER TO ORIGINAL PLAT					same is true and correct to the best of my belief.
Signature and Seal of Professional Surveyor REFER TO ORIGINAL PLAT					
Signature and Seal of Professional Surveyor REFER TO ORIGINAL PLAT					
REFER TO ORIGINAL PLAT					
1980'					Signature and Seal of Professional Surveyor
					REFER TO ORIGINAL PLAT
	1980'				
	H :	<del>                                     </del>			
Certificate Number		00%			Contribute Number
Certificate Number		)			Certificate Number

DISTRICT I 1825 N. French Dr., Hobbs, NM 88240 DISTRICT II 811 South First, Artesia, NM 88210 DISTRICT III 1000 Rio Brazos Rd:, Aztec, NM 87410

DISTRICT IV 2040 South Pacheco, Santa Fe, NM 87505

330'

660' 990'

1650' 1980' 2310'

#### State of New Mexico

Energy, Minerals and Natural Resources Department

Form C-102
Revised March 17, 1999
Instruction on back
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

### OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

☐ AMENDED REPORT

#### WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number	Pool Code	Pool Name Wildcat Chester	
Property Code	Property CLARENCE "BCU	•	Well Number 5
OGRID No.	Operator	Name	Elevation
025575	YATES PETROLEUM	CORPORATION	3327

#### Surface Location

UL or lot No.	Section	Township	Range	Lot idn	Feet from the	North/South line	Feet from the	East/West line	County
N	11	165	26E		660	south	1980	WEST	EDDY

#### Bottom Hole Location If Different From Surface

			200001	. 11010 2					
UL or lot No.	Section	Townsh	ip Range	Lot idn	Feet from the	North/South line	Feet from the	East/West line	County
Dedicated Acres	Joint o	r infill	Consolidation	Code	Order No.	<u> </u>	<u></u>	1	<u></u>
320									

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

FEE FEE	OPERATOR CERTIFICATION  I hereby certify the the information contained herein is true and complete to the best of my knowledge and bettef.  Signature
	Cy Cowan  Printed Name  Regulatory Agent  Title  July 20, 2004  Date  SURVEYOR CERTIFICATION
N.702697.3 E.493695.1 (NAD-27)	I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervison, and that the same is true and correct to the best of my belief.  6/08/2004  Date Surveyed
N.32°55'54.7" W.104°21'16.0"	Signature View View View View View View View Vie

2310' 1980' 1650'

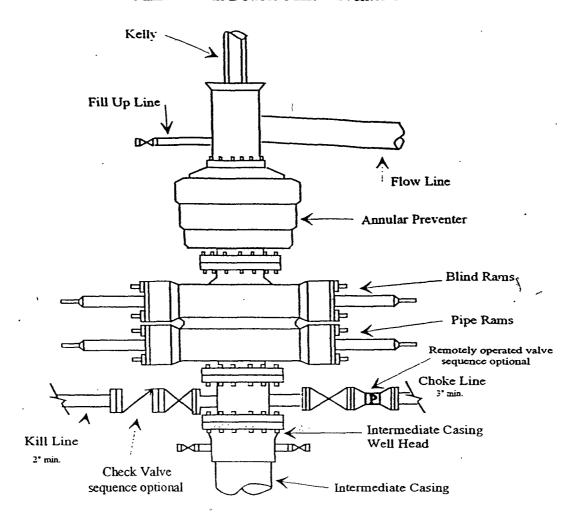
990'

660'

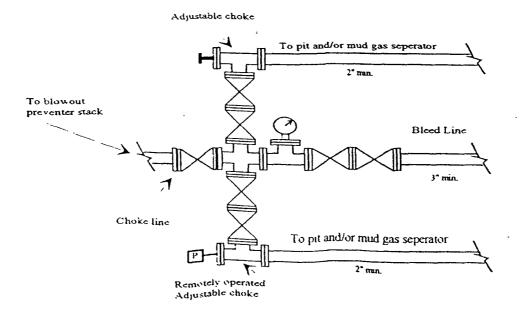
330

# Yates Petroleum Corporation

Typical 5,000 psi Pressure System
Schematic
Annular with Double Ram Preventer Stack



Typical 5,000 psi choke manifold assembly with at least these minimun features

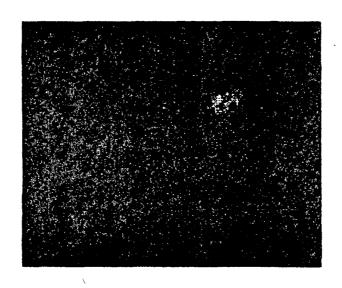




Legals:

CLARENCE BCU COM. #5
92,00' MORROW WELL
SECTION 11, T-16-S, R-26-E
660' FSL 1980' FWL
EDDY COUNTY, NEW MEXICO

# "CONTINGENCY PLAN"





#### Table of Contents

- I. H2S Contingency Plan Section
  - A. Scope
  - B. Objective
  - C. Discussion of Plan
- II. Emergency Procedures Section
  - A. Emergency Procedures
  - B. Emergency Reaction Steps
  - C. Simulated Blowout Control Drills
- III. Ignition Procedures Section
  - A. Responsibility
  - B. Instructions
- IV. Training Program Section
  - A. Training Requirements
- V. Emergency Equipment Section
  - A. Emergency Equipment Requirements
- VI. Check Lists Section
  - A. Status Check List
  - B. Procedural Check List
- VII. Briefing Procedure Section
  - A. Briefing Procedures
- VIII. Evacuation Plan Section
  - A. General Plan
  - B. Emergency Assistance Telephone List
- IX. Maps and Plats Section
  - A. Map showing Well site
  - B. Map showing Public within Radius of Exposure and Evacuation Routes
  - B. Emergency Call List of Residents and Businesses

#### X. General Information Section

- A. Drilling / Re-entry Permits
- B. 100 ppm Exposure Radius Chart
- C. 500 ppm Exposure Radius Chart
- D. Toxic Effects of Hydrogen Sulfide Poisoning
- E. Use of Self Contained Breathing Apparatus
- F. Rescue-First Aid for Hydrogen Sulfide Poisoning

#### I. H2S CONTINGENCY PLAN SECTION

#### Scope

This contingency plan establishes guidelines for all company employees and contract employees whose work activities may involve exposure to Hydrogen Sulfide gas (H2S).

#### Objective

- Prevent any and all accidents and prevent the uncontrolled release of H2S into the atmosphere.
- 2. Provide proper evacuation procedures to cope with emergencies.
- 3. Provide immediate and adequate medical attention should an injury occur.

#### Discussion of Plan

Implementation: This plan, with all details, is to be fully implemented prior to drilling below 1000'.

Emergency Response Procedure: This section outlines the conditions and denotes steps to be taken in the event of an emergency.

Emergency Equipment and Procedure: This section outlines the safety and emergency equipment that will be required for the drilling of this well.

Training Provisions: This section outlines the training provisions that must be adhered to prior to drilling below 1000'.

Emergency Call Lists: Included are the telephone numbers of all persons that would need to be contacted should an emergency occur.

Briefing: This section deals with the briefing of all people involved in the drilling operation.

Public Safety: Public Safety Personnel will be made aware of the drilling of this well.

Check Lists: Status Check Lists and Procedural Check Lists have been included to insure adherence to the plan.

General Information: A general information section has been included to supply support information.

#### II. EMERGENCY PROCEDURES SECTION

#### **Emergency Procedures**

- I. In the event of any evidence of H2S level above 10 ppm, take the following steps immediately:
  - A. Secure breathing apparatus.
  - B. Order non-essential personnel out of the danger zone.
  - C. Take steps to determine if the H2S level can be corrected or suppressed and if so, proceed with normal operations.
- II. If uncontrollable conditions occur, proceed with the following:
  - A. Take steps to protect and / or remove any public downwind of the rig including partial evacuation or isolation. Notify necessary public Safety personnel and Yates Petroleum Corporation, Drilling Foreman, Steve Cochran of the situation.
  - B. Remove all personnel to the Safe Briefing Area.
  - C. Notify public safety personnel for help with maintaining roadblocks and implementing evacuation.
  - D. Determine and proceed with the best possible plan to regain control of the well. Maintain tight security and safety procedures.

#### III. Responsibility

- A. The Company Approved Supervisor shall be responsible for the total implementation of the plan.
- B. The Company Approved Supervisor shall be in complete command during any emergency.
- C. The Company Approved Supervisor shall designate a back up Supervisor in the event that he / she is not available.

#### Emergency Reaction Steps

#### I. Drilling or Tripping

#### A. All Personnel

- When alarm sounds, don escape unit and report to upwind Safe Briefing Area
- 2. Check status of other personnel (Buddy System).
- 3. Secure breathing apparatus.
- 4. Await order from Supervisor

#### B. Drilling Foreman

- 1. Report to the upwind Safe Briefing Area.
- Don breathing apparatus and return to the point of release with the Tool Pusher or Driller (Buddy System).
- 3. Determine the concentration of H2S.
- Assess the situation and take appropriate control measures.

#### C. Tool Pusher

- 1. Report to the upwind Safe Briefing Area.
- Don breathing apparatus and return to the point of release with the Drilling Foreman or Driller (Buddy System).
- 3. Determine the concentration of H2S.
- 4. Assess the situation and take appropriate control measures.

#### D. Driller

- Don escape unit.
- 2. Check monitor for point of release.
- 3. Report to the Safe Briefing Area.
- Check the status of other personnel (in a rescue attempt, always use the buddy system).
- 5. Assign the least essential person to notify the Drilling Foreman and Tool Pusher, in the event of their absence.
- 6. Assume the responsibility of the Drilling Foreman and Tool Pusher until they arrive, in the event of their absence.

#### E. Derrick Man

1. Remain in the Safe Briefing Area until otherwise instructed by Supervisor.

#### F. Mud Engineer

- 1. Report to Safe Briefing Area.
- When instructed, begin check of mud for pH level and H2S level.

#### G. Safety Personnel

- 1. Don appropriate breathing apparatus.
- Check status of all personnel.
- 3. Await instructions from Drilling Foreman

#### II. Taking a Kick

- A. All personnel report to Safe Briefing Area.
- B. Follow standard BOP procedures.

#### III. Open Hole Logging

- A. All unnecessary personnel should leave the rig floor.
- B. Drilling Foreman and Safety personnel should monitor the conditions and make necessary safety equipment recommendations.

#### IV. Running Casing or Plugging

- A. Follow "Drilling or Tripping" procedures.
- B. Assure that all personnel have access to protective equipment.

#### Simulated Blowout Control Drills

All drills will be initiated by activating alarm devices (air horn). One long blast, on air horn, for Actual and Simulated Blowout Control Drills. The Drilling Foreman or Tool Pusher will perform this operation at least one time per week for each of the following conditions, with each crew:

Drill 1 Bottom Drilling

Drill 2 Tripping Drill Pipe

In each of these drills, the initial reaction time to shutting in the well shall be timed as well as the total time for the crew to complete its entire pit drill assignment. The times must be recorded on the IADC Driller's Log as "Blowout Control Drill".

Drill No.: _			
Reaction time	to shut-in:	minutes,	seconds.
Total time to	complete assignment:	minutes.	seconds.

#### I. Drill Overviews

- A. Drill No. 1--Bottom Drilling
  - 1. Sound the alarm immediately
  - Stop the rotary and hoist the kelly joint above the rotary table.
  - Stop the circulatory pump.
  - 4. Close drill pipe rams.
  - 5. Record casing and drill pipe shut-in pressures and pit volume increases.
- B. Drill No. 2--Tripping Drill Pipe
  - 1. Sound the alarm immediately
  - Position the upper tool joint just above the rotary table and set slips.
  - 3. Install a full opening valve or inside blowout preventer tool in order to close the drill pipe.
  - 4. Close the drill pipe rams.
  - 5. Record the shut-in annular pressure.

#### II. Crew Assignments

#### A. Drill No. 1-Bottom Drilling

#### 1. Driller

- a. Stop the rotary and hoist Kelly joint above the rotary table.
- b. Stop the circulatory pump.
- c. Check flow.
- d. If flowing, sound the alarm immediately.
- e. Record the shut-in drill pipe pressure.
- f. Record all data reported by the crew.
- g. Determine the mud weight increase needed or other courses of action.

#### 2. Derrickman

- a. Open choke line valve at BOP.
- b. Signal Floor Man #1 at accumulator, that choke line is open.
- c. Close choke and upstream valve after pipe tams have been closed.
- d. Read the shut-in annular pressure and report readings to Driller.

#### 3. Floor Man #1

- a. Close the pipe tams after receiving the signal from the Derrickman.
- b. Report to Driller for further instructions.

#### 4. Floor Man #2

- a. Notify the Tool Pusher and Operator Representative of the H2S alarms.
- b. Check for open fires and if safe to do so, extinguish them.
- c. Stop all welding operations.
- d. Turn off all non-explosion proof lights and instruments.
- e. Report to Driller for further instructions.

#### 5. Tool Pusher

- a. Report to the rig floor.
- b. Have a meeting with all crews.
- c. Compile and summarize all information.
- d. Calculate the proper kill weight.
- e. Ensure that proper well procedures are put into action.

#### 6. Operator Representative

- a. Notify the Drilling Superintendent.
- b. Determine if an emergency exists and if so, activate the contingency plan.

#### B. Drill No. 2-Tripping Pipe

#### Driller

- Sound the alarm immediately when mud volume increase has been detected.
- b. Position the upper tool joint just above the rotary table and set slips.
- c. Install a full opening valve or inside blowout preventor tool to close the drill pipe.
- d. Check flow.
- e. Record all data reported by the crew.
- f. Determine the course of action.

#### 2. Derrickman

- a. Come down out of derrick.
- b. Notify Tool Pusher and Operator Representative.
- c. Check for open fires and, if safe to do so, extinguish them.
- d. Stop all welding operations.
- e. Report to Driller for further instructions.

#### 3. Floor Man #1

- a. Pick up full opening valve or inside blowout preventers and stab into tool joint above rotary table (with Floor Man #2).
- b. Tighten valve with back-up tongs.
- c. Close pipe rams after signal from Floor Man #2.
- d. Read accumulator pressure and check for possible highpressure fluid leaks in valves or piping.
- e. Report to Driller for further instructions.

#### 4. Floor Man #2

- a. Pick-up full opening valve or inside blowout preventers and stab into tool joint above rotary table (with Floor Man #1).
- b. Position back-up tongs on drill pipe.
- c. Open choke line valve at BOP.
- d. Signal Floor Man #1, at accumulator, that choke line is open.
- close choke and upstream valve after pipe rams have been closed.
- f. Check for leaks on BOP stack and choke manifold.
- g. Read annular pressure.
- h. Report readings to the Driller.

#### 5. Tool Pusher

- a. Report to rig floor.
- b. Have a meeting with all crews.
- c. Compile and summarize all information.
- d. Calculate proper kill weight.
- e. See that proper well kill procedures are put into action.

#### 6. Operator Representative

- a. Notify Drilling Superintendent.
- b. Determine if an emergency exists, and if so, activate the contingency plan.

#### III. IGNITION PROCEDURES SECTION

#### Responsibility

The decision to ignite the well is the responsibility of the DRILLING FOREMAN in concurrence with the STATE POLICE. In the event the Drilling Foreman is incapacitated, it becomes the responsibility of the RIG TOOL PUSHER. This decision should be made only as a last resort and in a situation where it is clear that:

- 1. Human life and property are endangered.
- 2. There is no hope of controlling the blowout under the prevailing conditions.

If time permits, notify the main office, but do not delay if human life is in danger. Initiate the first phase of the evacuation plan.

#### Instructions for Igniting the Well

- 1. Two people are required for the actual igniting operation. Both men must wear self-contained breathing apparatus and attach a safety rope. One man must monitor the atmosphere for explosive gases with the Explosimeter, while the Drilling Foreman is responsible for igniting the well.
- The primary method to ignite is a 25mm flare gun with a range of approximately 500 feet.
- 3. Ignite from upwind and do not approach any closer than is warranted.
- Select the ignition site best suited for protection and which offers an easy escape route.
- 5. Before igniting, check for the presence of combustible gases.
- 6. After igniting, continue emergency actions and procedures as before.
- 7. All unassigned personnel will limit their actions to those directed by the Drilling Foreman.

NOTE: After the well is ignited, burning Hydrogen Sulfide will convert to Sulfur Dioxide, which is also highly toxic. Do not assume the area is safe after the well is ignited.

#### IV. TRAINING PROGRAM SECTION

#### Training Requirements

When working in an area where Hydrogen Sulfide gas (H2S) might be encountered, definite training requirements must be carried out. The Company Supervisor will insure that all personnel, at the well site, have had adequate training in the following:

- 1. Hazards and characteristics of H2S.
- 2. Physical effects of Hydrogen Sulfide on the human body.
- 3. Toxicity of Hydrogen Sulfide and Sulfur Dioxide.
- 4. H2S detection.
- 5. Emergency rescue.
- 6. Resuscitators.
- 7. First aid and artificial resuscitation.
- 8. The effects of H2S on metals.
- 9. Location Safety.

Service company personnel and visiting personnel must be notified in the zone contains H2S. Each service company must provide adequate training and equipment for their employees before they arrive at the well site.

#### V. EMERGENCY EQUIPMENT SECTION

#### Emergency Equipment Requirements

- I. Signs
  - A. Located at the location entrance with the following information:

#### CAUTION - POTENTIAL POISON GAS HYDROGEN SULFIDE NO ADMITTANCE WITHOUT AUTHORIZATION

- II.\* Fresh air breathing equipment
  - A. Air line units for all rig personnel on location.
  - B. Cascade system with hose lines to rig floor and one to the Derrickman and other operation areas. Spare cascade (trailer) on location.
- III. Wind Socks or Wind Streamers
  - A. Two 10" windsocks located at strategic locations at a height visible from the rig floor.
  - B. Wind streamers (if preferred) to be placed at various locations on the well site to insure wind consciousness at all times. (Corners of location).
- IV. Hydrogen Sulfide detector and alarms.
  - A. 1 four channel H2S monitor with alarms.
  - B. 4 Sensors, located at floor, bell nipple, shale shaker and pits.0
  - \* C. Hand operated detectors with tubes.
  - D. H2S monitor tester.
- V. Condition sign and flags
  - A. One each of green, yellow and red condition flags to be displayed to denote conditions:

GREEN Normal Conditions
YELLOW Potential Danger
RED Danger, H2S Present

- B. The condition flag shall be posted at the location entrance.
- VI.\* Auxiliary rescue equipment
  - A. Stretcher
  - B. Two 100' lengths of 5/8" nylon rope.
- VII.\* Mud Inspection devices
  - A. Garrett Gas Train or Hach Tester for inspection of Hydrogen Sulfide concentration in the mud system.
- VIII. Fire Extinguishers
  - A. Adequate fire extinguishers shall be located at strategic locations.
- IX. Blowout prevention equipment
  - A. The well shall have hydraulic BOP equipment for the anticipated BHP.
  - B. Equipment must be tested upon installation.
- X.\* Combustible gas detectors
  - A. There shall be one combustible gas detector on location at all times.

XI. BOP Testing

A. BOP, Choke Line and Rill Line will be tested as specified by operator

XII. Audio System

- A. Radio communications shall be available at the rig.
- B. Radio communications shall be available at the rig floor or trailer.
- Radio communications shall be available on vehicles.

XIII. Special control equipment

- A. Hydraulic BOP equipment with remote control on ground.
- B. Rotating head at surface casing point.

XIV. Evacuation Plan

- A. Evacuation routes should be established prior to spudding each well.
- B. Should be discussed with all rig personnel.

XV. Designated Areas

- Parking and visitor area.
  - 1. All vehicles are to be parked at a pre-determined safe distance from the wellhead.
  - 2. Designated smoking area.
- B. Safe Briefing Area
  - Two Safe Briefing Areas shall be designated on either side of the location at the maximum allowable distance from the well bore so they offset prevailing winds or they are at a 180 degree angle if wind directions tend to shift in the area.
  - 2. Personal protective equipment should be stored in both protection centers or if a moveable trailer is used, it should be kept upwind of existing winds. When wind is from the prevailing direction, both protection centers should be accessible.
- \*Additional equipment will be available at Callaway Safety Equipment Co.,
   Inc., 3229 N. Industrial, Hobbs, New Mexico (505) 392-2973
- Additional personal Hydrogen Sulfide monitors on location for all hands.
- Automatic Flare igniter installed on rig.

#### VI. CHECK LIST SECTION

#### Status Check List

#### NOTE: Date each item as they are implemented. 1. Sign at location entrance 2, Two (2) windsocks (in required locations) 3. Wind streamers (if required) 30 minute pressure demand air packs on location 4. for all rig personnel and mud loggers. 5. Air packs, inspected and ready for use. 6. Spare bottles for each air pack (if required) 7. Cascade system and hose line hook up 8. Cascade system for refilling air bottles 9. Choke manifold hooked up and tested (Before drilling out surface casing) 10. Remote Hydraulic BOP control (hooked up and tested before drilling out surface casing) 11. BOP Preventer tested (before drilling out surface casing) 12. Mud engineer on location with equipment to test mud for Hydrogen Sulfide 13. Safe Briefing Areas set up 14. Condition sign and flags on location and ready 15. Hydrogen Sulfide detection system hooked up 16. Hydrogen Sulfide alarm system hooked up 17. Stretcher on location at Safe Briefing Area 18. 1 - 100' length of 5/8" nylon rope on location 19. 1 - 20 # or 30 # ABC fire extinguisher in safety trailer in addition to those on rig 20. Combustible gas detector on location and tested

21.	All rig crews and supervisors trained (as required)	
22.	Access restricted for unauthorized personnel	
23.	Drills on H2S and well control procedures	***
24.	All outside service contractors advised of potential Hydrogen Sulfide on well	
25.	NO SMOKING sign posted	
26.	Hand operated H2S detector with tubes on location	
27.	25 mm flare gun with flares	
28.	Automatic Flare igniter installed on rig	

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#### Procedural Check List

#### Perform the following on each tour:

- Check fire extinguishers to see that they have the proper charge.
- 2. Check breathing equipment to insure that it has not been tampered with.
- Check pressure on supply air bottles to see that they are capable of recharging.
- 4. Make sure all of the Hydrogen Sulfide detection systems are operative.

#### Perform the following each week:

- 1. Check each piece of breathing equipment to make sure that the demand regulator is working. This requires that the bottle be opened and the mask assembly be put on tight enough so that when you inhale, you get air.
- 2. Blowout preventer skills.
- 3. Check supply pressure on BOP accumulator stand-by source.
- 4. Check all work/escape units for operation: demand regulator, escape bottle air volumes, and supply bottle air volume.
- Check breathing equipment mask assembly to see that straps are loosened and turned back.
- 6. Check pressure on breathing equipment air bottles to make sure they are charged to full volume.
- 7. Check breathing equipment air bottles to make sure all demand regulators are working. This requires that the bottles be opened and the mask assembly be put on tight enough so that when you inhale, you get air.
- 8. Confirm pressure on all supply air bottles.
- 9. Perform breathing equipment drills with on-site personnel.

#### Check the following supplies for availability:

- a. Stretcher
- b. Safety belts and ropes
- c. Emergency telephone lists
- d. Spare air bottle
- e. Spare oxygen bottles (if resuscitator required)
- f. Hand operated H2S detectors and tubes
- 10. Test the Explosimeter to verify batteries are good.

### VII. BRIEFING PROCEDURE SECTION

#### **Briefing Procedures**

The following scheduled briefings will be held to insure the effective drilling and operation of this project:

#### Pre-Spud Meeting

Date:

Prior to spudding the well

Attendance:

Drilling Supervisor Drilling Engineer Drilling Foreman Rig Pushers Rig Driller Mud Engineer

All Safety Personnel Service Companies

Purpose:

Review and discuss the well program, step by step, to insure complete understanding of assignments and responsibilities.

#### VIII. EVACUATION PLAN SECTION

#### General Plan

The direct lines of action prepared by CALLAWAY SAFETY EQUIPMENT CO., INC. to protect the public from hazardous gas situations are as follows:

- 1. When the company approved supervisor (Drilling Foreman, Tool Pusher, Driller) determine Hydrogen Sulfide gas cannot be limited to the well location and the public will be involved, he will activate the evacuation plan. Escape routes are noted on the Area map.
- Company safety personnel or designee will notify the appropriate local government agency that a hazardous condition exists and evacuation needs to be implemented.
- Company approved safety personnel that have been trained in the use of Hydrogen Sulfide detection equipment and self-contained breathing equipment will be utilized.
- 4. Law Enforcement personnel (State Police, Sheriff's Department, local Police Department and local Fire Department) will be called to aid in setting up and maintaining roadblocks. Also, they will aid in evacuation of the public if necessary.

NOTE: Law enforcement personnel will not be asked to come into a contaminated area. Their assistance will be limited to uncontaminated areas. Constant radio contact will be maintained with them.

5. After the discharge of gas has been controlled, "Company" safety personnel will determine when the area is safe for re-entry.

See Emergency Reaction Plan

#### EMERGENCY ASSISTANCE TELEPHONE LIST

PUBLIC SAFETY		
Artesia P.D. Eddy County Sheriff New Mexico State Po Artesia Fire Depart New Mexico OCD (Tim New Mexico D.O.T. U.S. Dept. of Labor	lice ment Gum)	(505) 746-2704 or 911 (505) 887-7551 or 911 (505) 746-2704 or 911 (505) 746-2704 or 911 (505) 748-1283 (505) 827-5100 (505) 248-5302
TATES PETROLEUM COR	PORATION  Drilling Superintendent	(505) 748-1471 (office)
Steve Cochran	Drilling Foreman	(505) 365-4029 (office)
SAFETY CONTRACTOR	·	
Callaway Safety Equ	ipment	(505) 392-2973 (Robbs) (432) 561-5049 (Odessa)

# Affected Public Notification List (within a 65' radius of exposure 0 100 ppm)

The geologic zones that will be encountered during drilling are known to contain hazardous quantities of H2S. The accompanying map illustrates the affected areas of the community. The residents within this radius will be notified via a hand delivered written notice describing the activities, potential hazards, and conditions of evacuation, evacuation drill siren alarms and other precautionary measures.

Evacuee Description: Residents

Notification Process: A continuous siren audible to all residents will

be activated; signaling evacuation of previously

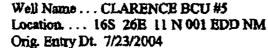
notified and informed residents.

Evacuation Plan: All evacuees will migrate lateral to the wind

direction.

The Oil Company will identify all homebound or highly susceptible individuals and make special evacuation preparations, interfacing with the local fire and emergency medical services as necessary.

#### IX. MAPS AND PLATS SECTION.



Directions to Location

GO NORTH OF ARTESIA ON HWY 285 FOR APPROX. 2.1 MILES TO THE HWY 2 TURN OFF. GO NORTH ON HWY 2 FOR APPROXIMATELY 3 MILES TO LAWRENCE RANCH ROAD. TURN RIGHT ON LAWRENCE RANCH ROAD AND GO EAST FOR APPROX. 1.7 MILES. COUNTY ROAD GOES TO THE NORTH. FOLLOW COUNTY ROAD FOR APPROX. 1.1 MILES. TURN EAST HERE AT BIG TANK. GO EAST ON TWO TRACK ROAD FOR APPROX. 3 OF A MILE TO CORRALS. TURN TO THE SOUTHEAST AND GO APPROX. .1 OF A MILE TO THE PROPOSED CLARENCE BCU #5 LOCATION. THE NEW ROAD WILL START FROM THE SOUTHEAST CORNER OF THE #5 LOCATION GOING EAST FOR .1 OF A MILE THEN TURN SOUTH ON TWO TRACK ROAD AND GO .7 OF A MILE. THE NEW ROAD WILL START HERE GOING EAST FOR .1 OF A MILE TO THE SOUTHWEST CORNER OF THE PROPOSED WELL LOCATION.

#### X. GENERAL INFORMATION SECTION

#### Toxic Effects of Hydrogen Sulfide Poisoning

Hydrogen Sulfide is extremely toxic. The acceptable ceiling concentration for eight-hour exposure is 20 ppm, which is .002% by volume. Hydrogen Sulfide is heavier than air (specific gravity - 1.192) and colorless. It forms an explosive mixture with air between 4.3 and 46.0 percent by volume. Hydrogen Sulfide is almost as toxic as Hydrogen Cyanide and is between five and six times more toxic than Carbon Monoxide. Toxicity data for Hydrogen Sulfide and various other gases are compared below in Table I. Physical effects at various Hydrogen Sulfide levels are shown in Table II.

Table I
Toxicity of Various Gases

Common Name	Chemical Formula	Specific Gravity	Threshold Limit (A)	Hazardous Limit (B)	Lethal Concentration (C)
Hydrogen Cyanide	нси	0.94	10 ppm	150 ppm/hr	300 ppm
Hydrogen Sulfide	.H2S	1.18	10 ppm (D) 20 ppm (E)	250 ppm/hr	600 ppm
Sulfur Dioxide	SO2	2.21	5 ppm		1000 ppm
Chlorine	CL2	2.45	1 ppm	4 ppm/hr	1000 ppm
Carbon Monoxide	СО	0.97	50 ppm	400 ppm/hr	1000 ppm
Carbon Dioxide	CO2	1.52	5000 ppm	(5 %)	(10 %)
Methane	CH4	0.55	90,000 ppm	(9 %)	Combustible Above 5% in air

A. Threshold Limit - Concentration at which it is believed that all workers may be repeatedly exposed day after day without adverse effects.

B. Hazardous Limit - Concentration that may cause death.

C. Lethal Concentration - Concentration that will cause death with short-term exposure.

D. Threshold Limit (10 ppm) - 1972 ACGIH (American Conference of Governmental Industrial Hygienists).

E. Threshold Limit (20 ppm) - 1966 ANSI acceptable ceiling concentration for eight-hour exposure (based on 40 hour week) is 20 ppm. OSHA Rules and Regulations (Federal Register, Volume 37, No. 202, Part II, dated 10/18/72)

Table II
Physical Effects of Hydrogen Sulfide

Percent (%)	ppm	Physical Effects
0.001	10	Obvious and unpleasant odor
0.002	20	Safe for 8 hrs. exposure
0.01	100	Kills smell in 3-5 minutes; may sting eyes & throat
0.02	200	Kills smell shortly; stings eyes and throat
0.03	300	IDLH (Immediate Danger to Life and Health) Level
0.05	500	Dizziness; breathing ceases in a few minutes
0.07	700	Unconscious quickly; death will result if not rescued
0.10	1000	Unconscious at once; followed by death within minutes

<sup>\*</sup> CAUTION: Hydrogen Sulfide is a colorless and transparent gas and is highly flammable. It is heavier than air and may accumulate in low places.

## Use of Self-Contained Breathing Apparatus

(SCBA)

- I. Written procedures shall be prepared covering safe use of respirators in dangerous atmospheric situations, which might be encountered in normal operations or in emergencies. Personnel shall be familiar with these procedures and the available respirators.
- II. Respirators shall be inspected frequently, at random, to insure that they are properly used, cleaned and maintained.
- III. Anyone who may use respirators shall be trained in how to properly seal the face piece. They shall wear respirators in normal air and then in a test atmosphere. (NOTE: Such items as facial hair (beard or sideburns) and eyeglass temple pieces will not allow a proper seal). Anyone that may be expected to wear respirators should have these items removed before entering a toxic atmosphere. A special mask must be obtained for anyone who must wear eyeglasses. Contact lenses should not be allowed.
- IV. Maintenance and care of Respirators
  - A. A program of maintenance and care of respirators shall include the following:
    - Inspection for defects, including leak checks.
    - Cleaning and disinfecting.
    - 3. Repair
    - 4. Storage
  - B. Inspection: Self Contained Breathing Apparatus (SCBA) for emergency use shall be inspected monthly and records maintained for the following:
    - Fully charged cylinders.
    - 2. Regulator and warning device operation.
    - 3. Condition of face piece and connection.
    - 4. Elastomer or rubber parts shall be stretched or massaged to keep them pliable and prevent deterioration.
  - C. Routinely used respirators shall be collected, cleaned and disinfected as frequently as necessary to insure proper protection is provided.
- V. Persons assigned tasks that require the use of Self Contained Breathing Equipment shall be certified physically fit for breathing equipment usage by the local company physician at least annually.
- VI. Respirators should be worn during the following conditions:
  - A. Any employee who works near the top or on the top of any tank unless tests reveal less than 20 ppm of H2S.
  - B. When breaking out any line where H2S can reasonably be expected.
  - C. When sampling air in areas to determine if toxic concentrations of H2S exist.
  - D. When working in areas where over 20 ppm H2S has been detected.
  - E. At any time there is a doubt as to the H2S level in the area to be entered.

#### Rescue-First Aid for Hydrogen Sulfide Poisoning

#### DO NOT PANIC !!!!

#### Remain Calm -- THINK

- 1. Hold your breath (Do not inhale; stop breathing) and go to Briefing Area.
- Put on breathing apparatus.
- 3. Remove victim(s) to fresh air as quickly as possible. (Go upwind from the source or at right angles to the wind; NOT downwind).
- 4. Briefly apply chest pressure—arm lift method of artificial respiration to clear the victim's lungs and to avoid inhaling any toxic gas directly from the victim's lungs.
- 5. Provide for prompt transportation to the hospital and continue giving artificial respiration if needed.
- 6. Hospital(s) or medical facilities need to be informed, beforehand, of the possibility of H2S gas poisoning, no matter how remote the possibility.
- 7. Notify emergency room personnel that the victim(s) have been exposed to H2S gas.

Besides basic first aid, everyone on location should have a good working knowledge of artificial respiration, as well as first aid for eyes and skin contact with liquid H2S. Everyone needs to master these necessary skills.