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 NMOCD District Office.

For downstream facilities, submit to Santa Fe office

Form C-144 June 1, 2004

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Pit or Below-Cirade	Tank Registration or Closure
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	nk covered by a "general plan"? Yes 🔯 or below-grade tank 🗵 Closure of a pit or below		
Operator:DEVON ENERGY PRODUCTION CO., LP Teleph AddressPO Box 250 Artesia, NM 88211 Facility or well name: Eagle 33 D Fed 19 API # 30-0 County:Eddy Latitude Longitude	15-3383 U/L or Qtr/Qtr O Sec 33	TMS RZZE	
Pit  [ype: Drilling   Production   Disposal    Workover   Emergency    Lined   Unlined    Liner type   Synthetic   Thickness   12 mil   Clay    Pit Volumebbl	Below-grade tank  Volume:bbl Type of fluid:  Construction material:  Double-walled, with leak detection? Yes [] If not, explain why not.  RECEIVED		
Depth to ground water (vertical distance from bottom of pit to seasonal high water elevation of ground water.)	Less than 50 feet 50 feet or more, but less than 100 feet 100 feet or more	(20 points) (10 points) (0 points)	DEC 2-0 2004
Wellhead protection area. (Less than 200 feet from a private domestic vater source, or less than 1000 feet from all other water sources.)	Ycs No	(20 points)	
Distance to surface water: (horizontal distance to all wetlands, playas, rrigation canals, ditches, and perennial and ephemeral watercourses.)	Less than 200 feet 200 feet or more, but less than 1000 feet 1000 feet or more	(20 points) (10 points) (0 points)	
If this is a pit closure: (1) attach a diagram of the facility showing the pit's your are burying in place) onsite offsite offsite. If offsite, name of facility remediation start date and end date. (4) Groundwater encountered: No 1 Y Attach soil sample results and a diagram of sample locations and excavation Additional Comments:	(3) Attach a gene	ral description of remedial	action taken including
I hereby certify that the information above is true and complete to the best of been/will be constructed or closed according to NMOCD guidelines , Date: 12 20 04.  Printed Name/Title_Linda Guthrie/ Regulatory Specialist_  Your certification and NMOCD approval of this application/closure does not otherwise endanger public health or the cirvironment. Nor does it relieve the regulations.	a general permit  , or an (attached) alternative   Signature   t relieve the operator of liability should the confer	oc OCD approved plan [	].
Approval Printed Name/Title	Signature	DE Date:	C 2 1 2004