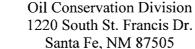
Mf

Form C-144 June 24, 2008

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

State of New Mexico Energy Minerals and Natural Resources Department



For temporary pits, closed-loop systems, and below-grade tanks, submit to the appropriate NMOCD District Office.

For permanent pits and exceptions submit to

For permanent pits and exceptions submit to the Santa Fe Environmental Bureau office and provide a copy to the appropriate NMOCD District Office.

Proposed Alternative Method Permit or Closure Plan Application

JUL 10 2008 OCD-ARTESIA

Type of action: X Permit of a pit, closed-loop system, below-grade tank, or proposed alternative method Closure of a pit, closed-loop system, below-grade tank, or proposed alternative method Instructions: Please submit one application (Form C-144) per individual pit, closed-loop system, below-grade tank or alternative request Please be advised that approval of this request does not relieve the operator of liability should operations result in pollution of surface water, ground water or the environment. Nor does approval relieve the operator of its responsibility to comply with any other applicable governmental authority's rules, regulations or ordinances. Operator: Mack Energy Corporation P.O. Box 960 Artesia, NM 88211-0960 Address: Bills Federal Com #1 Facility or well name: API.Number: OCD Permit Number: U/L or Qtr/Qtr E Section 20 Township 16S Range 29E County: Eddy, NM ___ NAD: □1927 □ 1983 ____Longitude ____ Center of Proposed Design: Latitude Surface Owner: XX Federal State Private Tribal Trust or Indian Allotment Pit: Subsection F or G of 19.15.17.11 NMAC ☐ Closed-loop System: Subsection H of 19.15.17.11 NMAC ☐ Drying Pad ☐ Tanks ☑ Haul-off Bins ☐ Other Temporary: Drilling Workover Permanent Emergency Cavitation Steel Pit ☐ Lined ☐ Unlined Liner type: Thickness _____mil LLDPE HDPE PVC ☐ Lined ☐ Unlined Other ____ __ String-Reinforced Seams: Welded Factory Other Volume: _____bbl yd³ Volume: _____ bbl Dimensions: L____ x W____ x D__ Dimensions: Length x Width Below-grade tank: Subsection I of 19.15.17.11 NMAC Fencing: Subsection D of 19.15.17.11 NMAC Chain link, six feet in height, two strands of barbed wire at top Type of fluid: Four foot height, four strands of barbed wire evenly spaced between one and Tank Construction material: Secondary containment with leak detection Netting: Subsection E of 19.15.17.11 NMAC Visible sidewalls, liner, 6-inch lift and automatic overflow shut-off ☐ Screen ☐ Netting ☐ Other ☐ Visible sidewalls and liner ☐ Monthly inspections ☐ Visible sidewalls only Signs: Subsection C of 19.15.17.11 NMAC Other 12'x24', 2' lettering, providing Operator's name, site location, and emergency telephone numbers Other Signed in compliance with 19.15.3.103 NMAC Administrative Approvals and Exceptions: Submittal of an exception request is required. Exceptions must be Justifications and/or demonstrations of equivalency are required. Please refer to submitted to the Santa Fe Environmental Bureau office for consideration 19.15.17 NMAC for guidance. of approval. Please check a box if one or more of the following is requested, if not leave blank:

Administrative approval(s): Requests must be submitted to the appropriate division district or the Santa Fe Environmental Bureau office for

Exception(s): Requests must be submitted to the Santa Fe Environmental Bureau office for consideration of approval.

consideration of approval.

Siting Criteria (regarding permitting): 19.15.17 10 NMAC Instructions: The applicant must demonstrate compliance for each siting criteria below in the application. Recommendations of acceptable source material are provided below. Requests regarding changes to certain siting criteria may require administrative approval from the appropriate district office or may be considered an exception which must be submitted to the Santa Fe Environmental Bureau office for consideration of approval. Applicant must attach justification for request. Please refer to 19.15.17.10 NMAC for guidance. Siting criteria does not apply to drying pads or above-grade tanks associated with a closed-loop system.	
Ground water is less than 50 feet below the bottom of the temporary pit, permanent pit, or below-grade tank. - NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells	☐ Yes ☐ No
Within 300 feet of a continuously flowing watercourse, or 200 feet of any other watercourse, lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark). - Topographic map; Visual inspection (certification) of the proposed site	☐ Yes ☐ No
Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application. (Applies to temporary, emergency, or cavitation pits and below-grade tanks) - Visual inspection (certification) of the proposed site; Aerial photo; Satellite image	☐ Yes ☐ No ☐ NA
Within 1000 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application. (Applies to permanent pits) - Visual inspection (certification) of the proposed site; Aerial photo: Satellite image	☐ Yes ☐ No ☐ NA
Within 500 horizontal feet of a private, domestic fresh water well or spring that less than five households use for domestic or stock watering purposes, or within 1000 horizontal feet of any other fresh water well or spring, in existence at the time of initial application. - NM Office of the State Engineer - iWATERS database search; Visual inspection (certification) of the proposed site	☐ Yes ☐ No
Within incorporated municipal boundaries or within a defined municipal fresh water well field covered under a municipal ordinance adopted pursuant to NMSA 1978, Section 3-27-3, as amended. - Written confirmation or verification from the municipality; Written approval obtained from the municipality	☐ Yes ☐ No
Within 500 feet of a wetland. - US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site	☐ Yes ☐ No
Within the area overlying a subsurface mine. - Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division	☐ Yes ☐ No
Within an unstable area. - Engineering measures incorporated into the design; NM Bureau of Geology & Mineral Resources; USGS; NM Geological Society, Topographic map	☐ Yes ☐ No
Within a 100-year floodplain FEMA map	☐ Yes ☐ No
Temporary Pits, Emergency Pits, and Below-grade Tanks Permit Application Attachment Checklist: Subsection B of 19.15.17.9 Instructions: Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the dattached. Hydrogeologic Report (Below-grade Tanks) - based upon the requirements of Paragraph (4) of Subsection B of 19.15.17.15 NMAC Hydrogeologic Data (Temporary and Emergency Pits) - based upon the requirements of Paragraph (2) of Subsection B of 19.15.17 Situng Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC 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 - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC	ocuments are
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 distanced. Geologic and Hydrogeologic Data (required for on-site closure) - based upon the requirements of Paragraph (3) of Subsection B of Siting Criteria Compliance Demonstrations (required for on-site closure) - based upon the appropriate requirements of 19.15.17.11 NMAC 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 - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19 15.17.13 NMAC NMAC	f 19.15 17 15
Previously Approved Design (attach copy of design) API Number:	

Permanent Pits Permit Application 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 de	ocuments are
attached. Hydrogeologic Report - based upon the requirements of Paragraph (1) of Subsection B of 19.15 17 15 NMAC Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19 15 17.10 NMAC	
☐ Climatological Factors Assessment ☐ Certified Engineering Design Plans - based upon the appropriate requirements of 19 15.17 11 NMAC	
Dike Protection and Structural Integrity Design - based upon the appropriate requirements of 19/15.17 11 NMAC	
Leak Detection Design - based upon the appropriate requirements of 19 15.17 11 NMAC	
Liner Specifications and Compatibility Assessment - based upon the appropriate requirements of 19 15.17 11 NMAC	
 Quality Control/Quality Assurance Construction and Installation Plan Operating and Maintenance Plan - based upon the appropriate requirements of 19.15 17.12 NMAC 	
Freeboard and Overtopping Prevention Plan - based upon the appropriate requirements of 19.15.17.11 NMAC	
☐ Nuisance or Hazardous Odors, including H ₂ S, Prevention Plan	
Emergency Response Plan	
☐ Oil Field Waste Stream Characterization ☐ Monitoring and Inspection Plan	
Erosion Control Plan	
Closure Plan - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15 17.13 NMAC	
Proposed Closure: 19.15.17.13 NMAC	
Type: ☐ Drilling ☐ Workover ☐ Emergency ☐ Cavitation ☐ Permanent Pit ☐ Below-grade Tank ☐ Closed-loop System ☐] Alternative
Proposed Closure Method: Waste Excavation and Removal	
On-site Closure Method (only for temporary pits and closed-loop systems)	
☐ In-place Burial ☐ On-site Trench Burial	
Alternative Closure Method (Exceptions must be submitted to the Santa Fe Environmental Bureau for con	asideration)
Siting Criteria (regarding on-site closure methods only): 19.15.17.10 NMAC	
Instructions: Each siting criteria requires a demonstration of compliance in the closure plan. Recommendations of acceptable	
source material are provided below. Requests regarding changes to certain siting criteria may require administrative approval from the appropriate district office or may be considered an exception which must be submitted to the Santa Fe Environmental Bureau	
office for consideration of approval. Justifications and/or demonstrations of equivalency are required. Please refer to 19.15.17.10	
NMAC for guidance.	
Ground water is less than 50 feet below the bottom of the buried waste.	
- NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells	☐ Yes ☐ No ☐ NA
Ground water is between 50 and 100 feet below the bottom of the buried waste	Yes No
- NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells	□ NA
Ground water is more than 100 feet below the bottom of the buried waste.	☐ Yes ☐ No
- NM Office of the State Engineer - iWATERS database search; USGS, Data obtained from nearby wells	□ МА
Within 300 feet of a continuously flowing watercourse, or 200 feet of any other watercourse, lakebed, sinkhole, or playa lake	☐ Yes ☐ No
(measured from the ordinary high-water mark).	
- Topographic map; Visual inspection (certification) of the proposed site	
Within 200 feet from a nemonant recidence coheel hospital institution or shurch in existence at the time of initial application	□ Vaa□ Na
Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application. - Visual inspection (certification) of the proposed site; Aerial photo; Satellite image	☐ Yes ☐ No
	_
Within 500 horizontal feet of a private, domestic fresh water well or spring that less than five households use for domestic or stock	Yes No
watering purposes, or within 1000 horizontal feet of any other fresh water well or spring, in existence at the time of initial application. - NM Office of the State Engineer - iWATERS database; Visual inspection (certification) of the proposed site	
The office of the office angular Times and analytical improvious (of the proposed site	
Within incorporated municipal boundaries or within a defined municipal fresh water well field covered under a municipal ordinance	☐ Yes ☐ No
adopted pursuant to NMSA 1978, Section 3-27-3, as amended. - Written confirmation or verification from the municipality; Written approval obtained from the municipality	
written commination of vermeation from the maintipanty, written approval obtained from the maintipanty	
Within 500 feet of a wetland.	☐ Yes ☐ No
- US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site	
Within the area overlying a subsurface mine.	Yes No
- Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division	
Within an unstable area. - Engineering measures incorporated into the design; NM Bureau of Geology & Mineral Resources; USGS, NM Geological	☐ Yes ☐ No
Society; Topographic map	
Within a 100 year floodylain	
Within a 100-year floodplain FEMA map	Yes No

Waste Excavation and Removal Closure Plan Checklist: (19.15.17.13 NMAC) Instructions: Each of the following items must be attached to the
closure plan. Please indicate, by a check mark in the box, that the documents are attached.
Protocols and Procedures - based upon the appropriate requirements of 19.15.17.13 NMAC
☐ Confirmation Sampling Plan (if applicable) - based upon the appropriate requirements of Subsection F of 19.15.17.13 NMAC ☐ Disposal Facility Name and Permit Number (for liquids, drilling fluids and drill cuttings)
 ☑ Disposal Facility Name and Permit Number (for liquids, drilling fluids and drill cuttings) ☑ 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
Waste Removal Closure For Closed-loop Systems That Utilize Haul-off Bins Only: (19.15.17.13.D NMAC) Instructions: Please indentify the facility
or facilities for the disposal of liquids, drilling fluids and drill cuttings.
Disposal Facility Name: Controlled Recovery Inc. Disposal Facility Permit Number: R-9166
On-Site Closure Plan Checklist: (19.15.17.13 NMAC) Instructions: Each of the following items must be attached to the closure plan. Please indicate,
by <u>a</u> check mark in the box, that the documents are attached.
Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC
Proof of Surface Owner Notice - based upon the appropriate requirements of Subsection F of 19.15.17.13 NMAC
Construction and Design of Burial Trench (if applicable) based upon the appropriate requirements of 19.15.17.11 NMAC
Protocols and Procedures - based upon the appropriate requirements of 19.15.17.13 NMAC Confirmation Sampling Plan (if applicable) - based upon the appropriate requirements of Subsection F of 19.15.17.13 NMAC
Waste Material Sampling Plan - based upon the appropriate requirements of Subsection F of 19.15.17.13 NMAC
Disposal Facility Name and Permit Number (for liquids, drilling fluids and drill cuttings or in case on-site closure standards cannot be achieved)
Soil Cover Design - 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
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): Jerry W. Sherrell Title: Production Report
Name (Finit).
Signature: Jenny W. Sherroll Date: 7-9-08
e-mail address: jerrys@mackenergycorp.com Telephone: (575) 748-1288
OCD Approval: Permit Application (including closure plan) [Closure Plan (only)
OCD Propresentative Signatures - 1/15-/18
OCD Propresentative Signatures - 1/15-/18
OCD Propresentative Signatures - 1/15-/18
OCD Propresentative Signatures - 1/15-/18
OCD Representative Signature: Jens W. Seese Approval Date: 7/15/08 Title: OZOS114
OCD Representative Signature: Approval Date: 7/5/08 Title: Approval Date: 7/5/08 Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC Closure Completion Date:
OCD Representative Signature: Approval Date: 7/5/08 Title: Approval Date: 7/5/08 Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC Closure Method:
OCD Representative Signature: Approval Date: 7/5/08 Title: Approval Date: 7/5/08 Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC Closure Completion Date:
OCD Representative Signature: Approval Date: 7//5/08 Title: Subsection K of 19.15.17.13 NMAC Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC Closure Method: Alternative Closure Method If different from approved plan, please explain.
OCD Representative Signature: Approval Date: 7//5/08 Title: Subsection K of 19.15.17.13 NMAC Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC Closure Method: Closure Completion Date: Alternative Closure Method If different from approved plan, please explain. Closure Report Attachment Checklist: Instructions: Each of the following items must be attached to the closure report. Please indicate, by a check
OCD Representative Signature: Approval Date: 7//5/08 Title: Subsection K of 19.15.17.13 NMAC Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC Closure Method: Closure Completion Date: Closure Excavation and Removal On-Site Closure Method Alternative Closure Method If different from approved plan, please explain. Closure Report Attachment Checklist: Instructions: Each of the following items must be attached to the closure report. Please indicate, by a checkmark in the box, that the documents are attached.
OCD Representative Signature: Approval Date: 7//5/08 Title: Subsection K of 19.15.17.13 NMAC Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC Closure Method: Closure Completion Date: Closure Method: Alternative Closure Method If different from approved plan, please explain. Closure Report Attachment Checklist: Instructions: Each of the following items must be attached to the closure report. Please indicate, by a check mark in the box, that the documents are attached. Proof of Closure Notice
OCD Representative Signature: Approval Date: 7//5/08 Title: Subsection K of 19.15.17.13 NMAC Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC Closure Method: Closure Completion Date: Closure Excavation and Removal On-Site Closure Method Alternative Closure Method If different from approved plan, please explain. Closure Report Attachment Checklist: Instructions: Each of the following items must be attached to the closure report. Please indicate, by a checkmark in the box, that the documents are attached.
Approval Date: 7//5/08 Title: Subsection K of 19.15.17.13 NMAC Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC Closure Method: Waste Excavation and Removal On-Site Closure Method Alternative Closure Method If different from approved plan, please explain. Closure Report Attachment Checklist: Instructions: Each of the following items must be attached to the closure report. Please indicate, by a checkmark in the box, that the documents are attached. Proof of Closure Notice Proof of Deed Notice (if applicable) Plot Plan Confirmation Sampling Analytical Results
OCD Representative Signature: Approval Date: 7//5/08 Title: Subsection K of 19.15.17.13 NMAC Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC Closure Method: Closure Completion Date: Closure Method: Alternative Closure Method If different from approved plan, please explain. Closure Report Attachment Checklist: Instructions: Each of the following items must be attached to the closure report. Please indicate, by a checkmark in the box, that the documents are attached. Proof of Closure Notice Proof of Deed Notice (if applicable) Plot Plan Confirmation Sampling Analytical Results Waste Material Sampling Analytical Results
Approval Date: 7/5 08 Title: Subsection K of 19.15.17.13 NMAC Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC Closure Completion Date: Closure Method: Waste Excavation and Removal On-Site Closure Method Alternative Closure Method If different from approved plan, please explain. Closure Report Attachment Checklist: Instructions: Each of the following items must be attached to the closure report. Please indicate, by a check mark in the box, that the documents are attached. Proof of Closure Notice Proof of Deed Notice (if applicable) Plot Plan Confirmation Sampling Analytical Results Waste Material Sampling Analytical Results Disposal Facility Name and Permit Number
Approval Date: 7//5/08 Title:
OCD Representative Signature: Approval Date: 7/5 / 08 Title: Subsection K of 19.15.17.13 NMAC Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC Closure Method: Closure Completion Date: Closure Method: Alternative Closure Method If different from approved plan, please explain. Closure Report Attachment Checklist: Instructions: Each of the following items must be attached to the closure report. Please indicate, by a check mark in the box, that the documents are attached. Proof of Closure Notice Proof of Deed Notice (if applicable) Plot Plan Confirmation Sampling Analytical Results Waste Material Sampling Analytical Results Disposal Facility Name and Permit Number Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique
Approval Date: 7/5 / 08 Title: Subsection K of 19.15.17.13 NMAC Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC Closure Method: Alternative Closure Method If different from approved plan, please explain. Closure Report Attachment Checklist: Instructions: Each of the following items must be attached to the closure report. Please indicate, by a checkmark in the box, that the documents are attached. Proof of Closure Notice Proof of Deed Notice (if applicable) Plot Plan Confirmation Sampling Analytical Results Waste Material Sampling Analytical Results Disposal Facility Name and Permit Number Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique Site Reclamation (Photo Documentation)
Title: Supervisive ormit Number: 02.08.1.4 Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC Closure Completion Date: Closure Method: Alternative Closure Method Alternative Closure Method If different from approved plan, please explain. Closure Report Attachment Checklist: Instructions: Each of the following items must be attached to the closure report. Please indicate, by a check mark in the box, that the documents are attached. Proof of Closure Notice Proof of Deed Notice (if applicable) Plot Plan Confirmation Sampling Analytical Results Disposal Facility Name and Permit Number Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique Site Reclamation (Photo Documentation) On-site Closure Location: Latitude Longitude NAD: 1927 1983
Approval Date: 7//5 / 08 Title: Subsection K of 19.15.17.13 NMAC Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC Waste Excavation and Removal On-Site Closure Method Alternative Closure Method If different from approved plan, please explain. Closure Report Attachment Checklist: Instructions: Each of the following items must be attached to the closure report. Please indicate, by a check mark in the box, that the documents are attached. Proof of Closure Notice Proof of Deed Notice (if applicable) Plot Plan Confirmation Sampling Analytical Results Waste Material Sampling Analytical Results Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique Site Reclamation (Photo Documentation) On-site Closure Location: Latitude Longitude NAD: 1927 1983
Approval Date:
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Approval Date: 7/5/08 Title: Subsection K of 19.15.17.13 NMAC Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC Closure Completion Date: Closure Completion Date:
Approval Date:
Title:
Approval Date: 7/5/08 Title: Subsection K of 19.15.17.13 NMAC Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC Closure Completion Date: Closure Completion Date:

Mack Energy Closed Loop System Design Plan

Equipment list,

- 2-414 Swaco Centrifuges
- 2-4 screen Mongoose shale shakers
- 2-250 BBL tanks to hold fluid
- 2- CRI Bins with track system
- 2-500 BBL frac tanks for fresh water
- 2-500 BBL frac tanks for brine water

Operation and Maintenance

Closed Loop equipment will be inspected daily by each tour and any necessary maintenance performed

Any leak in system will be repaired and/or contained immediately

OCD notified within 48 hours

Remediation process started

Closure Plan

During drilling operations all liquids, drilling fluids and cuttings Will be hauled off via CRI(Controlled Recovery Incorporated Permit R-9166).

