

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

Form C-144  
July 21, 2008

For temporary pits, closed-loop systems, and below-grade tanks, submit to the appropriate NMOCD District Office.  
For permanent pits and exceptions submit to the Santa Fe Environmental Bureau office and provide a copy to the appropriate NMOCD District Office

Pit, Closed-Loop System, Below-Grade Tank, or  
Proposed Alternative Method Permit or Closure Plan Application

OCT 07 2008

OCD-ARTESIA

Type of action:

- ☐ 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  
☐ Modification to an existing permit  
☐ Closure plan only submitted for an existing permitted or non-permitted 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.

1.  
Operator: Cimarex Energy Co. OGRID #: \_\_\_\_\_  
Address: P.O. Box 140907, Irving TX 75014-0907  
Facility or well name: White City 31 Federal 4  
API Number: 30-015-35494 OCD Permit Number: 020823  
U/L or Qtr/Qtr P Section 31 Township 24S Range 26E County: Eddy  
Center of Proposed Design: Latitude 32 10 07.1N Longitude 104 19 39.8 W NAD: ☒ 1927 ☐ 1983  
Surface Owner: ☒ Federal ☐ State ☐ Private ☐ Tribal Trust or Indian Allotment

2.  
☐ **Pit:** Subsection F or G of 19.15.17.11 NMAC  
Temporary: ☐ Drilling ☐ Workover  
☐ Permanent ☐ Emergency ☐ Cavitation ☐ P&A  
☐ Lined ☐ Unlined Liner type: Thickness \_\_\_\_\_ mil ☐ LLDPE ☐ HDPE ☐ PVC ☐ Other \_\_\_\_\_  
☐ String-Reinforced  
Liner Seams: ☐ Welded ☐ Factory ☐ Other \_\_\_\_\_ Volume: \_\_\_\_\_ bbl Dimensions: L \_\_\_\_\_ x W \_\_\_\_\_ x D \_\_\_\_\_

3.  
☐ **Closed-loop System:** Subsection H of 19.15.17.11 NMAC  
Type of Operation: ☐ P&A ☒ Drilling a new well ☐ Workover or Drilling (Applies to activities which require prior approval of a permit or notice of intent)  
☒ Drying Pad ☐ Above Ground Steel Tanks ☐ Haul-off Bins ☐ Other \_\_\_\_\_  
☐ Lined ☐ Unlined Liner type: Thickness 20 mil ☐ LLDPE ☐ HDPE ☐ PVC ☐ Other \_\_\_\_\_  
Liner Seams: ☒ Welded ☐ Factory ☐ Other \_\_\_\_\_

4.  
☐ **Below-grade tank:** Subsection I of 19.15.17.11 NMAC  
Volume: \_\_\_\_\_ bbl Type of fluid: \_\_\_\_\_  
Tank Construction material: \_\_\_\_\_  
☐ Secondary containment with leak detection ☐ Visible sidewalls, liner, 6-inch lift and automatic overflow shut-off  
☐ Visible sidewalls and liner ☐ Visible sidewalls only ☐ Other \_\_\_\_\_  
Liner type: Thickness \_\_\_\_\_ mil ☐ HDPE ☐ PVC ☐ Other \_\_\_\_\_



5.  
☐ **Alternative Method:**  
Submittal of an exception request is required. Exceptions must be submitted to the Santa Fe Environmental Bureau office for consideration of approval.

*Final Closure*

6.

**Fencing:** Subsection D of 19.15.17.11 NMAC (*Applies to permanent pits, temporary pits, and below-grade tanks*)

- ☐ Chain link, six feet in height, two strands of barbed wire at top (*Required if located within 1000 feet of a permanent residence, school, hospital, institution or church*)
- ☐ Four foot height, four strands of barbed wire evenly spaced between one and four feet
- ☐ Alternate. Please specify \_\_\_\_\_

7.

**Netting:** Subsection E of 19.15.17.11 NMAC (*Applies to permanent pits and permanent open top tanks*)

- ☐ Screen ☐ Netting ☐ Other \_\_\_\_\_
- ☐ Monthly inspections (If netting or screening is not physically feasible)

8.

**Signs:** Subsection C of 19.15.17.11 NMAC

- ☐ 12"x 24", 2" lettering, providing Operator's name, site location, and emergency telephone numbers
- ☐ Signed in compliance with 19.15.3.103 NMAC

9.

**Administrative Approvals and Exceptions:**

Justifications and/or demonstrations of equivalency are required. Please refer to 19.15.17 NMAC for guidance.

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

10.

**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.<br>- NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells                                                                                                                                                                                      | <input type="checkbox"/> Yes <input type="checkbox"/> No                                |
| Within 300 feet of a continuously flowing watercourse, or 200 feet of any other significant watercourse or lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark).<br>- Topographic map; Visual inspection (certification) of the proposed site                                                                                                                                  | <input type="checkbox"/> Yes <input type="checkbox"/> No                                |
| Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application.<br>(Applies to temporary, emergency, or cavitation pits and below-grade tanks)<br>- Visual inspection (certification) of the proposed site; Aerial photo; Satellite image                                                                                         | <input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> NA |
| Within 1000 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application.<br>(Applies to permanent pits)<br>- Visual inspection (certification) of the proposed site; Aerial photo; Satellite image                                                                                                                                        | <input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> 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<br>- NM Office of the State Engineer - iWATERS database search; Visual inspection (certification) of the proposed site | <input type="checkbox"/> Yes <input type="checkbox"/> 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.<br>- Written confirmation or verification from the municipality; Written approval obtained from the municipality                                                                                           | <input type="checkbox"/> Yes <input type="checkbox"/> No                                |
| Within 500 feet of a wetland.<br>- US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site                                                                                                                                                                                                                                             | <input type="checkbox"/> Yes <input type="checkbox"/> No                                |
| Within the area overlying a subsurface mine<br>- Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division                                                                                                                                                                                                                                                              | <input type="checkbox"/> Yes <input type="checkbox"/> No                                |
| Within an unstable area.<br>- Engineering measures incorporated into the design; NM Bureau of Geology & Mineral Resources; USGS, NM Geological Society; Topographic map                                                                                                                                                                                                                                 | <input type="checkbox"/> Yes <input type="checkbox"/> No                                |
| Within a 100-year floodplain.<br>- FEMA map                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> Yes <input type="checkbox"/> No                                |

11.

**Temporary Pits, Emergency Pits, and Below-grade Tanks 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.

- ☐ Hydrogeologic Report (Below-grade Tanks) - based upon the requirements of Paragraph (4) of Subsection B of 19.15.17.9 NMAC
- ☐ Hydrogeologic Data (Temporary and Emergency Pits) - based upon the requirements of Paragraph (2) of Subsection B of 19.15.17.9 NMAC
- ☐ Siting 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 (Please complete Boxes 14 through 18, if applicable) - 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: \_\_\_\_\_ or Permit Number: \_\_\_\_\_

12.

**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.

- ☐ Geologic and Hydrogeologic Data (only for on-site closure) - based upon the requirements of Paragraph (3) of Subsection B of 19.15.17.9
- ☐ Siting Criteria Compliance Demonstrations (only for on-site closure) - 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 (Please complete Boxes 14 through 18, if applicable) - 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 Plan      API Number: \_\_\_\_\_ (Applies only to closed-loop system that use above ground steel tanks or haul-off bins and propose to implement waste removal for closure)

13.

**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 documents are attached.

- ☐ Hydrogeologic Report - based upon the requirements of Paragraph (1) of Subsection B of 19.15.17.9 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<sub>2</sub>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

14.

**Proposed Closure:** 19.15.17.13 NMAC**Instructions:** Please complete the applicable boxes, Boxes 14 through 18, in regards to the proposed closure plan.

Type: ☒ Drilling ☐ Workover ☐ Emergency ☐ Cavitation ☐ P&A ☐ Permanent Pit ☐ Below-grade Tank ☐ Closed-loop System

☐ Alternative

Proposed Closure Method: ☒ Waste Excavation and Removal

☐ Waste Removal (Closed-loop systems only)

☐ 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 consideration)

15.

**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)
- ☐ 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

16.

**Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only:** (19.15.17.13.D NMAC)

*Instructions: Please identify 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: Controlled Recovery Inc. Disposal Facility Permit Number: NMOCD R9166/NMED DP818

Disposal Facility Name \_\_\_\_\_ Disposal Facility Permit Number \_\_\_\_\_

Will any of the proposed closed-loop system operations and associated activities occur on or in areas that *will not* 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

17.

**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

- NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells

☐ Yes ☐ No

☐ NA

Ground water is more than 100 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

Within 300 feet of a continuously flowing watercourse, or 200 feet of any other significant watercourse or 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.

- 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 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

☐ 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

18.

**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 a 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/Design Plan of Burial Trench (if applicable) based upon the appropriate requirements of 19.15.17.11 NMAC

☐ Construction/Design Plan of Temporary Pit (for in-place burial of a drying pad) - 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

19

**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: \_\_\_\_\_

20.

**OCD Approval:** ☐ Permit Application (including closure plan) ☐ Closure Plan (only) ☐ OCD Conditions (see attachment)

**OCD Representative Signature:** \_\_\_\_\_ **Approval Date:** \_\_\_\_\_

**Title:** \_\_\_\_\_ **OCD Permit Number:** \_\_\_\_\_

21

**Closure Report (required within 60 days of closure completion):** 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: August 23, 2008

22.

**Closure Method:**

☒ Waste Excavation and Removal ☐ On-Site Closure Method ☐ Alternative Closure Method ☐ Waste Removal (Closed-loop systems only)  
☐ If different from approved plan, please explain.

23.

**Closure Report Regarding Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only:**

*Instructions: Please identify the facility or facilities for where the liquids, drilling fluids and drill cuttings were disposed. Use attachment if more than two facilities were utilized.*

Disposal Facility Name: Controlled Recovery Inc. Disposal Facility Permit Number: NMOCD R9166/NMED DP818

Disposal Facility Name: \_\_\_\_\_ Disposal Facility Permit Number: \_\_\_\_\_

Were the closed-loop system operations and associated activities performed on or in areas that *will not* be used for future service and operations?

☒ Yes (If yes, please demonstrate compliance to the items below) ☐ No

*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

24.

**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 (surface owner and division)  
☐ Proof of Deed Notice (required for on-site closure)  
☐ Plot Plan (for on-site closures and temporary pits)  
☒ Confirmation Sampling Analytical Results (if applicable)  
☐ Waste Material Sampling Analytical Results (required for on-site closure)  
☒ 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

25.

**Operator Closure Certification:**

I hereby certify that the information and attachments submitted with this closure report is true, accurate and complete to the best of my knowledge and belief. I also certify that the closure complies with all applicable closure requirements and conditions specified in the approved closure plan.

Name (Print): Dorsey Rogers Title: Drilling Superintendent

Signature: \_\_\_\_\_ Date: 10/1/2008

e-mail address: dorseyrogers@aol.com Telephone: 575-200-6105

**Accepted for record  
NMOCD**



**4311 Monica Lane, Carlsbad, NM 88220**

**Phone 575-236-6012**

**Fax 575-236-6063**

**Cell 575- 361-3217**

**bandr@pvtnetworks.net**

October 2, 2008

Cimarex Energy Co.  
P.O. Box 140907  
Irving Texas 75014-0907

Re: Cimarex Energy Co.  
White City 31 Federal 4 – Final Drying pad Closure

**White City 31 Federal 4**  
API: 30-015-35494  
Sec 31-T-24S-R-26E

Depth to Ground Water: 100'  
Planned Analytical Testing: Chlorides, BTEX, TPH  
Primary Land Use: Ranching and Oil & Gas Production

Pursuant to Paragraph (1) of Subsection D of 19.15.17.13 NMAC of the New Mexico Oil Conservation District of the State of New Mexico regulatory requirement for drying pad closure, please accept the following documentation for final closure of the drying pad for the aforementioned location.

All drill cuttings were transported to Controlled Recovery, Inc. of Hobbs, New Mexico (Permit number NMOCD R 9166 / NMED DP818). Upon transferring all drying pad contents to C.R.I., field tests were performed on the soil within in the confines of the original drying pad. The analytical results of Chloride delineation, BTEX 8021B/602/8260B/624, and TPH 8015 GRO/DRO/TVHC of the impacted material are attached.

Soil samples were collected, prepared, and packaged per EPA guidelines and forwarded to Trace Analysis in Lubbock, Texas for official analytical testing. Please find the official analytical results attached hereto.

Soil backfill and cover design was done to meet appropriate requirements of subsection H of 19.15.17.13 NMAC. This included covering sites existing grade by applying one foot of existing topsoil to establish growth. The entire disturbed are was then contoured to prevent ponding of water and erosion of cover material.

Site reclamation was done to meet appropriate requirements of subsection G of 19.15.17.13 NMAC. This included reclaiming areas associated with the drying pad to a safe and stable condition that blends with surrounding undisturbed area and restoring surface area to conditions that existed prior to oil and gas operations.

Re-vegetation was done to meet appropriate requirements of subsection I of 19.15.17.13 NMAC. This included seeding all areas disturbed and associated with the drying pad. B.L.M. # 3 seed mix was hand broadcasted per B.L.M.'s request. Twenty pounds per acre applied.

Order of events:

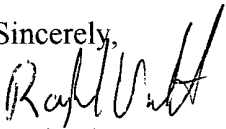
1. Received approval to excavate from O.C.D. on June 27, 2008
2. Began Removing mud July 9, 2008
3. Finished removing mud July 14, 2008
4. Phoenix Environmental performed field samples and continued digging until July 16, 2008.
5. Covered and contoured affected area with dozer on July 23, 2008.
6. Reseeded all affected areas on August 23, 2008

Sampling-Performed by Phoenix Environmental

Sample #1-SE-32°10'08.5"-N-104°19'40.0"-W  
Sample #2-NE-32°10'09.1"-N -104°19'40.1"-W  
Sample #2-Center-32°10'08.8"-N-104°19'40.4"-W  
Sample #4-NW-32°10'09.1"-N-104°19'40.7"-W  
Sample #5-SW-32°10'08.5"-N-104°19'40.6"-W  
Background Sample-32°10'09.9"-N-104°19'41.7"-W

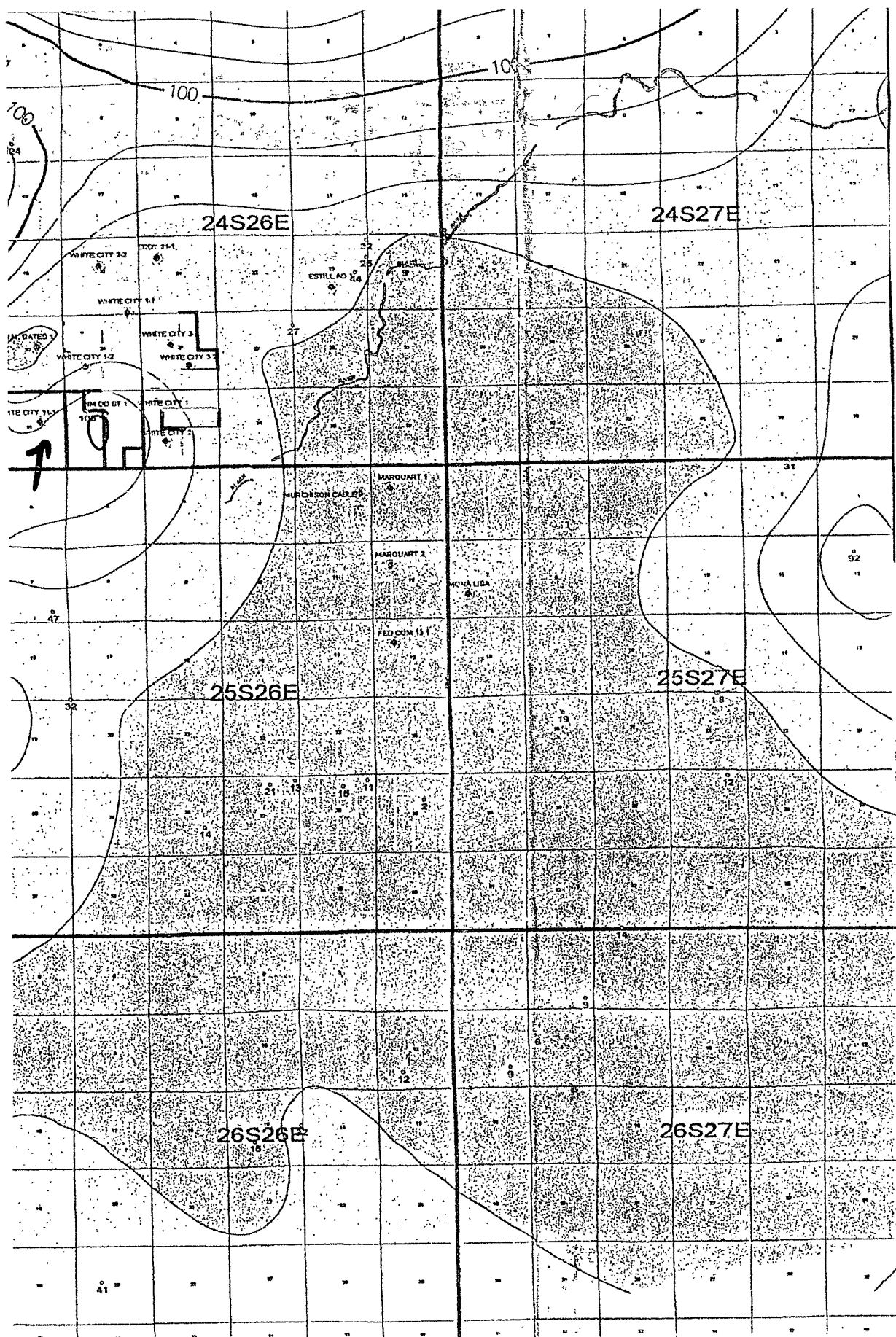
Please review the attached documentation and contact me at 575-361-2132 with any questions or concerns.

Sincerely,



Rayland VanNatta  
B&R Trucking





## DISTRICT I

1025 N. French Dr., Hobbs, NM 88240

## DISTRICT II

1201 W. Grand Avenue, Artesia, NM 88210

## DISTRICT III

1000 Rio Brazos Rd., Arisa, NM 87410

## DISTRICT IV

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

State of New Mexico  
Energy, Minerals and Natural Resources DepartmentOIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, New Mexico 87505Form C-102  
Revised October 12, 2005Submit to Appropriate District Office  
State Lease - 4 Copies  
Fee Lease - 3 Copies☐ AMENDED REPORT

## WELL LOCATION AND ACREAGE DEDICATION PLAT

|                    |                                                 |           |                        |
|--------------------|-------------------------------------------------|-----------|------------------------|
| API Number         | 87280                                           | Pool Name | White City, Penn (Gas) |
| Property Code      | Property Name<br>WHITE CITY "31" FEDERAL        |           | Well Number<br>4       |
| OGED No.<br>162683 | Operator Name<br>CIMAREX ENERGY CO. OF COLORADO |           | Elevation<br>3409'     |

## Surface Location

| UL or lot No. | Section | Township | Range | Lot No. | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| P             | 31      | 24 S     | 26 E  |         | 800           | SOUTH            | 1250          | EAST           | EDDY   |

## Bottom Hole Location if Different From Surface

| UL or lot No.             | Section | Township             | Range | Lot No.            | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------------------|---------|----------------------|-------|--------------------|---------------|------------------|---------------|----------------|--------|
|                           |         |                      |       |                    |               |                  |               |                |        |
| Dedicated Acres<br>639.52 |         | Joint or Infill<br>Y |       | Consolidation Code |               | Order No.        |               |                |        |

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

|  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|  | <b>OPERATOR CERTIFICATION</b><br>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or undivided interest in the land including the proposed bottom hole location pursuant to a contract with an owner of such a mineral or working interest, or is a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.<br><u>Zeno Farris</u> 02-06-07<br>Signature Date<br>Zeno Farris<br>Printed Name |
|  | <b>SURVEYOR CERTIFICATION</b><br>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.<br>FEBRUARY 03, 2007<br>Date Surveyed for this<br>Signature of Gary L. Jones<br>Professional Surveyor<br>Gary L. Jones<br>Certificate No. Gary L. Jones 7977<br>BARN SURVEYS                                                                                                                                     |
|  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |

Report Date: July 24, 2008  
API #30-015-35494

Work Order: 8072219  
White City 31 Fed. #4

Page Number: 1 of 2  
UL-P-Sec. 31, T24S-R26E, Eddy Co., NM

## Summary Report

Dorsey Rogers  
Cimarex  
207 S Mesa  
Carlsbad, NM, 88220

Report Date: July 24, 2008

Work Order: 8072219



Project Location: UL-P-Sec. 31, T24S-R26E, Eddy Co., NM  
Project Name: White City 31 Fed. #4  
Project Number: API #30-015-35494

| Sample | Description        | Matrix | Date Taken | Time Taken | Date Received |
|--------|--------------------|--------|------------|------------|---------------|
| 167761 | Southeast 1/4 @ 2' | soil   | 2008-07-18 | 16:00      | 2008-07-22    |
| 167762 | Northeast 1/4 @ 2' | soil   | 2008-07-18 | 16:15      | 2008-07-22    |
| 167763 | Center @ 2'        | soil   | 2008-07-18 | 16:30      | 2008-07-22    |
| 167764 | Northwest 1/4 @ 2' | soil   | 2008-07-18 | 16:45      | 2008-07-22    |
| 167765 | Southwest 1/4 @ 2' | soil   | 2008-07-18 | 17:00      | 2008-07-22    |
| 167766 | Background @ 0-6"  | soil   | 2008-07-18 | 17:30      | 2008-07-22    |

| Sample - Field Code         | BTX                |                    |                         |                   | MTBE            | TPH DRO        | TPH GRO        |
|-----------------------------|--------------------|--------------------|-------------------------|-------------------|-----------------|----------------|----------------|
|                             | Benzene<br>(mg/Kg) | Toluene<br>(mg/Kg) | Ethylbenzene<br>(mg/Kg) | Xylene<br>(mg/Kg) | MTBE<br>(mg/Kg) | DRO<br>(mg/Kg) | GRO<br>(mg/Kg) |
| 167761 - Southeast 1/4 @ 2' | <0.0100            | <0.0100            | <0.0100                 | <0.0100           |                 | <50.0          | <1.00          |
| 167762 - Northeast 1/4 @ 2' | <0.0100            | <0.0100            | <0.0100                 | <0.0100           |                 | <50.0          | <1.00          |
| 167763 - Center @ 2'        | <0.0100            | <0.0100            | <0.0100                 | <0.0100           |                 | <50.0          | <1.00          |
| 167764 - Northwest 1/4 @ 2' | <0.0100            | <0.0100            | <0.0100                 | <0.0100           |                 | <50.0          | <1.00          |
| 167765 - Southwest 1/4 @ 2' | <0.0100            | <0.0100            | <0.0100                 | <0.0100           |                 | <50.0          | <1.00          |
| 167766 - Background @ 0-6"  | <0.0100            | <0.0100            | <0.0100                 | <0.0100           |                 | <50.0          | <1.00          |

### Sample: 167761 - Southeast 1/4 @ 2'

| Param    | Flag | Result | Units | RL   |
|----------|------|--------|-------|------|
| Chloride |      | 120    | mg/Kg | 3.25 |

### Sample: 167762 - Northeast 1/4 @ 2'

| Param    | Flag | Result | Units | RL   |
|----------|------|--------|-------|------|
| Chloride |      | 196    | mg/Kg | 3.25 |

Report Date: July 24, 2008  
API #30-015-35494

Work Order: 8072219  
White City 31 Fed. #4

Page Number: 2 of 2  
UL-P-Sec. 31, T24S-R26E, Eddy Co., NM

**Sample: 167763 - Center @ 2'**

| Param    | Flag | Result     | Units | RL   |
|----------|------|------------|-------|------|
| Chloride |      | <b>170</b> | mg/Kg | 3.25 |

**Sample: 167764 - Northwest 1/4 @ 2'**

| Param    | Flag | Result     | Units | RL   |
|----------|------|------------|-------|------|
| Chloride |      | <b>116</b> | mg/Kg | 3.25 |

**Sample: 167765 - Southwest 1/4 @ 2'**

| Param    | Flag | Result      | Units | RL   |
|----------|------|-------------|-------|------|
| Chloride |      | <b>91.5</b> | mg/Kg | 3.25 |

**Sample: 167766 - Background @ 0-6"**

| Param    | Flag | Result      | Units | RL   |
|----------|------|-------------|-------|------|
| Chloride |      | <b>93.4</b> | mg/Kg | 3.25 |

**TraceAnalysis, Inc.**

email: lab@traceanalysis.com

6701 Aberdeen Avenue, Suite 9  
Lubbock, Texas 79424  
Tel (806) 794-1296  
Fax (806) 794-1298  
1 (800) 378-12965002 Basin Street, Suite A1  
Midland, Texas 79703  
Tel (432) 689-6301  
Fax (432) 689-6313200 East Sunset Rd., Suite E  
El Paso, Texas 79922  
Tel (915) 585-3443  
Fax (915) 585-4944  
1 (888) 588-34438808 Camp Bowie Blvd West, Suite 180  
Ft. Worth, Texas 76116  
Tel (817) 201-5260  
Fax (817) 560-4336

Company Name: **Phoenix Environmental LLC** Phone #: **575-391-9685**  
 Address: (Street, City, Zip) **PO BOX 1856 Hobbs NM 88241** Fax #: **575-391-9687**  
 Contact Person: **Allen Hodge** E-mail: **EAHodge@LEAKO.NET**

Invoice to: (If different from above) **CIMARON**  
 Project #: **API# 30-015-35494** Project Name: **WHITE CITY 31 F-ED #4**  
 Project Location (including state): **ULP-SIL 31-T245-R262 eddy co nm** Sampler Signature: *[Signature]*

| LAB #<br>(LAB USE ONLY) | FIELD CODE            | # CONTAINERS | Volume / Amount | MATRIX |      |     |        | PRESERVATIVE METHOD |                  |                                |      |         |      | SAMPLING |      | MTBE 8021B / 602 | BTEX 8021B / 602 | TPH 418.1 / TX1005 | TPH 8015 GRO / DFO | PAH 8270C / 625 | Total Metals Ag As Ba C | TCLP Metals Ag As | TCLP Volatiles | TCLP Semi Volatiles | TCLP Pesticides | RCI | GC/MS Vol. 8260B / 6 | GC/MS Semi. Vol. 8 | PCB's 8082 / 608 | Pesticides 8081A / 6 | BOD, TSS, pH | Moisture Content | CL Chloride |  |  | Turn Around Time if | Hold |
|-------------------------|-----------------------|--------------|-----------------|--------|------|-----|--------|---------------------|------------------|--------------------------------|------|---------|------|----------|------|------------------|------------------|--------------------|--------------------|-----------------|-------------------------|-------------------|----------------|---------------------|-----------------|-----|----------------------|--------------------|------------------|----------------------|--------------|------------------|-------------|--|--|---------------------|------|
|                         |                       |              |                 | WATER  | SOIL | AIR | SLUDGE | HCl                 | HNO <sub>3</sub> | H <sub>2</sub> SO <sub>4</sub> | NaOH | ICE     | NONE | DATE     | TIME |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
| 761                     | 1-SouthEast 1/4 @ 2'  | 1            | 42              | X      |      |     |        |                     |                  | X                              |      | 7/18/08 | 4:00 | X        | X    |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
| 762                     | 2-NorthEast 1/4 @ 2'  | 1            |                 | X      |      |     |        |                     |                  | X                              |      |         | 4:15 | X        | X    |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
| 763                     | 3-CENTER @ 2'         | 1            |                 | X      |      |     |        |                     |                  | X                              |      |         | 4:30 | X        | X    |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
| 764                     | 4-NorthWest 1/4 @ 2'  | 1            |                 | X      |      |     |        |                     |                  | X                              |      |         | 4:45 | X        | X    |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
| 765                     | 5-South West 1/4 @ 2' | 1            |                 | X      |      |     |        |                     |                  | X                              |      |         | 5:00 | X        | X    |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
| 766                     | 6-BACKSLAND @ 16"     | 1            |                 | X      |      |     |        |                     |                  | X                              |      |         | 5:30 | X        | X    |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 |                         |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |
|                         |                       |              |                 |        |      |     |        |                     |                  |                                |      |         |      |          |      |                  |                  |                    |                    |                 | </                      |                   |                |                     |                 |     |                      |                    |                  |                      |              |                  |             |  |  |                     |      |

Relinquished by: *[Signature]* Company: **Phoenix** Date: **7-22-08** Time: **3:45**  
 Relinquished by: \_\_\_\_\_ Company: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_  
 Relinquished by: \_\_\_\_\_ Company: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Received by: *[Signature]* Company: **Trace** Date: **7/22/08** Time: **3:45** Temp: **3.99**  
 Received by: \_\_\_\_\_ Company: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Temp: \_\_\_\_\_  
 Received by: \_\_\_\_\_ Company: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Temp: \_\_\_\_\_

**LAB USE ONLY**Initials: *[Signature]*  
Headspace: *[Signature]*Log-in: Review *[Signature]*

REMARKS:

**2-DAY RUSH**

- ☐ Dry Weight Basis Required  
☐ TRRP Report Required  
☐ Check If Special Reporting Limits Are Needed

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

Form C-144  
June 16, 2008

For temporary pits, closed-loop systems, and below-grade tanks, submit to the appropriate NMOCD District Office.  
For permanent pits and exceptions submit to the Santa Fe Environmental Bureau office and provide a copy to the appropriate NMOCD District Office.

Pit, Closed-Loop System, Below-Grade Tank, or JUN 27 2008  
Proposed Alternative Method Permit or Closure Plan Application **OCD-ARTESIA**

Type of action: ☐ 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: <u>CFMAREX ENERGY CO. OF COLORADO</u>                                                                                                                           |                   | OGRID #:                                                 |
| Address: <u>PO BOX 140907 IRVING TX 75014</u>                                                                                                                             |                   |                                                          |
| Facility or well name: <u>WHITE CITY "31" FEDERAL 4</u>                                                                                                                   |                   |                                                          |
| API Number: <u>30-015-35494</u>                                                                                                                                           |                   | OCD Permit Number:                                       |
| U/L or Qtr/Qtr <u>P</u>                                                                                                                                                   | Section <u>31</u> | Township <u>24S</u> Range <u>26E</u> County: <u>EDDY</u> |
| Center of Proposed Design: Latitude <u>N32°10'07.1"</u> Longitude <u>W104°19'39.8"</u> NAD: <input type="checkbox"/> 1927 <input type="checkbox"/> 1983                   |                   |                                                          |
| Surface Owner: <input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> Private <input type="checkbox"/> Tribal Trust or Indian Allotment |                   |                                                          |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> <b>Pit:</b> Subsection F or G of 19.15.17.11 NMAC<br>Temporary: <input type="checkbox"/> Drilling <input type="checkbox"/> Workover<br><input type="checkbox"/> Permanent <input type="checkbox"/> Emergency <input type="checkbox"/> Cavitation<br><input type="checkbox"/> Lined <input type="checkbox"/> Unlined<br>Liner type: Thickness _____ mil <input type="checkbox"/> LLDPE <input type="checkbox"/> HDPE <input type="checkbox"/> PVC<br><input type="checkbox"/> Other _____ <input type="checkbox"/> String-Reinforced<br>Seams: <input type="checkbox"/> Welded <input type="checkbox"/> Factory <input type="checkbox"/> Other _____<br>Volume: _____ bbl Dimensions: L _____ x W _____ x D _____ | <input checked="" type="checkbox"/> <b>Closed-loop System:</b> Subsection H of 19.15.17.11 NMAC<br><input checked="" type="checkbox"/> Drying Pad <input type="checkbox"/> Tanks <input type="checkbox"/> Haul-off Bins <input type="checkbox"/> Other _____<br><input type="checkbox"/> Lined <input type="checkbox"/> Unlined<br>Liner type: Thickness <u>20</u> mil <input type="checkbox"/> LLDPE <input type="checkbox"/> HDPE <input type="checkbox"/> PVC<br><input type="checkbox"/> Other <u>402. FELT</u><br>Seams: <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Factory <input type="checkbox"/> Other _____<br>Volume: _____ bbl _____ yd <sup>3</sup><br>Dimensions: Length <u>100</u> x Width <u>100</u> |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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| <input type="checkbox"/> <b>Below-grade tank:</b> Subsection I of 19.15.17.11 NMAC<br>Volume: _____ bbl<br>Type of fluid: _____<br>Tank Construction material: _____<br><input type="checkbox"/> Secondary containment with leak detection<br><input type="checkbox"/> Visible sidewalls, liner, 6-inch lift and automatic overflow shut-off<br><input type="checkbox"/> Visible sidewalls and liner<br><input type="checkbox"/> Visible sidewalls only<br><input type="checkbox"/> Other _____<br>Liner type: Thickness _____ mil <input type="checkbox"/> HDPE <input type="checkbox"/> PVC<br><input type="checkbox"/> Other _____ | <input type="checkbox"/> <b>Fencing:</b> Subsection D of 19.15.17.11 NMAC<br><input type="checkbox"/> Chain link, six feet in height, two strands of barbed wire at top<br><input type="checkbox"/> Four foot height, four strands of barbed wire evenly spaced between one and four feet<br><input type="checkbox"/> <b>Netting:</b> Subsection E of 19.15.17.11 NMAC<br><input type="checkbox"/> Screen <input type="checkbox"/> Netting <input type="checkbox"/> Other _____<br><input type="checkbox"/> Monthly inspections<br><input type="checkbox"/> <b>Signs:</b> Subsection C of 19.15.17.11 NMAC<br><input type="checkbox"/> 12"x24', 2' lettering, providing Operator's name, site location, and emergency telephone numbers<br><input type="checkbox"/> Signed in compliance with 19.15.3.103 NMAC |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> <b>Alternative Method:</b><br>Submittal of an exception request is required. Exceptions must be submitted to the Santa Fe Environmental Bureau office for consideration of approval. | <b>Administrative Approvals and Exceptions:</b><br>Justifications and/or demonstrations of equivalency are required. Please refer to 19.15.17 NMAC for guidance.<br><b>Please check a box if one or more of the following is requested, if not leave blank:</b><br><input type="checkbox"/> Administrative approval(s): Requests must be submitted to the appropriate division district or the Santa Fe Environmental Bureau office for consideration of approval.<br><input type="checkbox"/> Exception(s): Requests must be submitted to the Santa Fe Environmental Bureau office for consideration of approval. |
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**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 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.

- ☐ Hydrogeologic Report (Below-grade Tanks) - based upon the requirements of Paragraph (4) of Subsection B of 19.15.17.9 NMAC
- ☐ Hydrogeologic Data (Temporary and Emergency Pits) - based upon the requirements of Paragraph (2) of Subsection B of 19.15.17.9 NMAC
- ☐ Siting 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

☐ Previously Approved Design (attach copy of design) API Number: \_\_\_\_\_ or Permit Number: \_\_\_\_\_

**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.

- ☐ Geologic and Hydrogeologic Data (required for on-site closure) - based upon the requirements of Paragraph (3) of Subsection B of 19.15.17.9 NMAC
- ☐ Siting Criteria Compliance Demonstrations (required for on-site closure) - 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

NMAC

☐ 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 documents are attached.*

- ☐ Hydrogeologic Report - based upon the requirements of Paragraph (1) of Subsection B of 19.15.17.9 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<sub>2</sub>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 consideration)

**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

- NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells

☐ Yes ☐ No  
☐ NA

Ground water is more than 100 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

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.

- 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 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

☐ 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

**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)
- ☒ 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 identify the facility or facilities for the disposal of liquids, drilling fluids and drill cuttings.*

Disposal Facility Name: CONTROLLED RECOVERY INC. Disposal Facility Permit Number: 11MOC R 9166/NMAC DPB18

**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 a 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): Dorsey Rogers Title: Drawing Supt.  
Signature: [Signature] Date: 6/26/2008  
e-mail address: dorseyrogers@carl.com Telephone: 575 200 6105

**OCD Approval:** ☐ Permit Application (including closure plan) ☐ Closure Plan (only)

OCD Representative Signature: Signed By Mike Brannon Approval Date: JUN 27 2008  
Title: Field Supervisor OCD Permit Number: 020823

**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
- ☐ 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

**Operator Closure Certification:**

I hereby certify that the information and attachments submitted with this closure report is true, accurate and complete to the best of my knowledge and belief. I also certify that the closure complies with all applicable closure requirements and conditions specified in the approved closure plan.

Name (Print): \_\_\_\_\_ Title: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
e-mail address: \_\_\_\_\_ Telephone: \_\_\_\_\_



**4311 Monica Lane, Carlsbad, NM 88220**

**Phone 505-236-6012**

**Fax 505-236-6063**

**Cell 505- 361-3217**

**Email bandr@pvtnetworks.net**

June 27, 2008

Cimarex Energy Co.  
P.O. Box 140907  
Irving Texas 75014-0907

Re: Cimarex Energy Co.  
White City "31" Federal 4-Re-vegetation Plan, Site Reclamation Plan, Soil Backfill and Cover Design

**White City "31" Federal 4**  
API: 30-015-35494  
Sec 31-T-24S-R-26E

**Re-vegetation Plan**

1. Will meet appropriate requirements of subsection I of 19.15.17.13 NMAC
2. Seed all areas disturbed and associated with the drying pad.
3. Obtain vegetation cover that equals 70% of the native perennial vegetation cover.
4. Apply seed consisting of at least three native plant species including at least one grass.
5. Maintain cover through two successive growing seasons.
6. Repeat seeding until it successfully achieves the required vegetation cover.

**Site Reclamation Plan**

1. Will meet appropriate requirements of subsection G of 19.15.17.13 NMAC
2. Reclaim areas associated with the drying pad to a safe and stable that blends with surrounding Undisturbed area.
3. Restore surface area to conditions that existed prior to oil and gas operations.

**Soil Backfill and Cover Design Specifications**

1. Will meet appropriate requirements of subsection H of 19.15.17.13 NMAC
2. Consist of the background thickness of topsoil or one foot of suitable material to establish vegetation.
3. Cover site's existing grade.
4. Contoured to prevent ponding of water and erosion of the cover material.

Please review documentation and contact me at 575-361-2132 with any questions or concerns.

Sincerely,

Rayland Vannatta  
B&R Trucking