

Dist. I
1625 French Dr., Hobbs, NM 88240
Dist. 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 CLEZ
July 21, 2008

For closed-loop systems that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure, submit to the appropriate NMOCD District Office.

6423 Closed-Loop System Permit or Closure Plan Application

(that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure)

Type of action: ☐ Permit ☒ Closure

Instructions: Please submit one application (Form C-144 CLEZ) per individual closed-loop system request. For any application request other than for a closed-loop system that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure, please submit a Form C-144.

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: NOBLE ENERGY, INC. OGRID#: 234550
Address: 1625 BROADWAY, SUITE 2200 DENVER, COLORADO 80202
Facility or well name: RIO BRAVO #1
API Number: 30-045-24322 OCD Permit Number: DIST. 3
U/L or Qtr/Qtr B Section 27 Township 31N Range 13W County SAN JUAN
Center of Proposed Design: Latitude 36.87588° Longitude 108.18798° NAD. ☒ 1927 ☐ 1983
Surface Owner: ☐ Federal ☐ State ☒ Private ☐ Tribal Trust or Indian Allotment

2.
☒ Closed-loop System: Subsection H of 19.15.17.11 NMAC
Operation: ☐ Drilling a new well ☐ Workover or Drilling (Applies to activities which require prior approval of a permit or notice of intent) ☒ P&A
☒ Above Ground Steel Tanks or ☐ Haul-off Bins

3.
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

4.
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.
☒ 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 Box 5) - 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: _____

5.
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: JFJ LAND FARMS CO/INDUSTRIAL ECOSYSTEMS, INC. Disposal Facility Permit Number: NM01-0010B
Disposal Facility Name: BASIN DISPOSAL Disposal Facility Permit Number: NM01-005
Disposal Facility Name: ENVIROTECH, INC SOIL REMEDIATION FACILITY Disposal Facility Permit Number: NM01-0011
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

6.

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: _____

7.

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

OCD Representative Signature: Jonathan D. Kelly Approval Date: 3/09/2012

Title: Compliance Officer OCD Permit Number: _____

8.

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: 05/17/2010

9.

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: See Attached C-138 Disposal Facility Permit Number: _____

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

10.

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): BILLIE MAEZ Title: DISTRICT MANAGER

Signature: Billie Maez Date: JUNE 10, 2010

e-mail address: bmaez@nobleenergyinc.com Telephone: 505-632-8056

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Form C-138
Revised March 12, 2007

*Surface Waste Management Facility Operator
and Generator shall maintain and make this
documentation available for Division inspection

REQUEST FOR APPROVAL TO ACCEPT SOLID WASTE

1. Generator Name and Address:	Noble Energy Inc. 5802 US Hiway 64 Farmington, New Mexico 87401
2. Originating Site:	Rio Bravo #1
3. Location of Material (Street Address, City, State or ULSTR):	Unit B Sec 27 T31N R13W San Juan County New Mexico
4. Source and Description of Waste:	Work pit on Work Over Rig. Water, Sand, & Cement.
Estimated Volume: 2-3 yd ³ / bbls	Known Volume (to be entered by the operator at the end of the haul)
5. GENERATOR CERTIFICATION STATEMENT OF WASTE STATUS	
I, Cody Munkres, representative or authorized agent for Noble Energy Inc. do hereby certify that according to the Resource Conservation and Recovery Act (RCRA) and the US Environmental Protection Agency's July 1988 regulatory determination, the above described waste is: (Check the appropriate classification)	
<input checked="" type="checkbox"/> RCRA Exempt: Oil field wastes generated from oil and gas exploration and production operations and are not mixed with non-exempt waste. <u>Operator Use Only: Waste Acceptance Frequency</u> <input type="checkbox"/> Monthly <input type="checkbox"/> Weekly <input type="checkbox"/> Per Load	
<input type="checkbox"/> RCRA Non-Exempt: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined in 40 CFR, part 261, subpart D, as amended. The following documentation is attached to demonstrate the above-described waste is non-hazardous. (Check the appropriate items)	
<input type="checkbox"/> MSDS Information <input type="checkbox"/> RCRA Hazardous Waste Analysis <input type="checkbox"/> Process Knowledge <input type="checkbox"/> Other (Provide description in Box 4)	
6. GENERATOR 19.15.36.15 WASTE TESTING CERTIFICATION STATEMENT FOR LANDFARMS	
I, [Signature], representative for IEI do hereby certify that	
Representative/Agent Signature	
representative samples of the oil field waste have been subjected to the paint filter test and tested for chloride content and that the samples have been found to conform to the specific requirements applicable to landfarms pursuant to Section 15 of 19.15.36 NMAC. The results of the representative samples are attached to demonstrate the above-described waste conform to the requirements of Section 15 of 19.15.36 NMAC.	
7. Transporter: A Plus Well Service	

OCB Permitted Surface Waste Management Facility

Name and Facility Permit #: JFJ Landfarm c/o Industrial Ecosystems, Inc. / NM 01-0010B

Address of Facility: # 49 CR 3150 Aztec, NM 87410

Method of Treatment and/or Disposal:

☐ Evaporation ☐ Injection ☐ Treating Plant ☒ Landfarm ☐ Landfill ☐ Other

Waste Acceptance Status:

☒ **APPROVED**

☐ **DENIED** (Must Be Maintained As Permanent Record)

PRINT NAME: Chris Hopkins

TITLE: Admin. Specialist

DATE: 5/17/10

SIGNATURE: [Signature]
Surface Waste Management Facility Authorized Agent

TELEPHONE NO.: 505-632-1782

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ph= 9
RCWD MAR 9 '12
OIL CONS. DIV.
DIST. 3

5/13/10