District I 1625 N French Dr , Hobbs, NM 88240

District II

1301 W Grand Ave, Artesia, NM 88210

District III

1000 Rio Brazos Rd, Aztec, NM 87410

State of New Mexico **Energy Minerals and Natural Resources**

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

July 21, 2008 For temporary pits, closed-loop sytems, and below-grade

Form C-144

tanks, submit to the appropriate NMOCD District Office

For permanent pits and exceptions submit to the Santa Fe

District IV 1220 S St Francis Dr., Santa Fe, NM 87505		,			au office and pro District Office	vide a copy to the
	Pit, Closed-Loop S	System, Belov	-Grade Ta	nk, or		
Prop	osed Alternative Me	ethod Permit of	r Closure	Plan App	olication	
Type of action:	Permit of a pit, closed-	loop system, below	-grade tank, o	r proposed al	ternative met	hod
•	X Closure of a pit, closed	l-loop system, belo	w-grade tank,	or proposed a	alternative me	ethod
•	Modification to an exi	sting permit				
	Closure plan only sub			non-permitte	ed pit, closed	-loop system,
	below-grade tank, or p	•				
Instructions: Please submit one						
	of this request does not relieve the op lieve the operator of its responsibility		-	-		
Operator: Burlington Resources C	oil & Gas Company, LP		OGI	RID#: <u>145</u> 3	38	
Address: PO Box 4289, Farming	on, NM 87499					
Facility or well name: San Juan 3:	2-9 Unit 257S					
API Number:	30-045-32525	OCD Pern	ut Number			
U/L or Qtr/Qtr: F(SE/NW) Sect		31N Rang	ge: <u>9W</u>	_ County:	San Juan	·
Center of Proposed Design: Latitud	e: <u>36.91583</u>	<u>°N</u> Longitu		7.80583	•W NAI	D: X 1927 1983
Surface Owner: X Federal	State Privat	te Tribal Trust	or Indian Allo	otment		
Permanent Emergency Lined Unlined String-Reinforced	Cavitation P&A Liner type Thickness . Factory Other	mıl LLl	DPE HDPI		Otherxv	DIL CONS. DIV. DIST. 3 V × D
Type of Operation X P&A Drying Pad X Above Gro Lined Unlined Lir		<u> </u>	Applies to activi		_	oval of a permit or
4 Below-grade tank: Subsection Volume Tank Construction material Secondary containment with leak of Visible sidewalls and liner Liner Type Thickness	bbl Type of fluid	walls, liner, 6-inch lii Other	t and automatic	overflow shut-	-off	
5 Alternative Method: Submittal of an exception request is re	duired. Exceptions must be sub	mitted to the Santa F	: Environmental	Bureau office	for considerat	ion of approval

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Oil Conservation Division

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6	Equality Subsection D of 10.15.17.11 NIMAC (Applies to provide all temporary puts and below and trade)		
	Fencing: Subsection D of 19 15 17.11 NMAC (Applies to permanent pit, 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, insi	utution or chui	rch)
	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		
_	X Signed in compliance with 19 15 3 103 NMAC		7
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 of the Santa Fe Environmental Bureau office for cons (Fencing/BGT Liner)	ideration of ap	proval
	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. - 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	Yes	□No
	(measured from the ordinary high-water mark). - Topographic map, Visual inspection (certification) of the proposed site		
	Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial	Yes	No
	application.		
	(Applies to temporary, emergency, or cavitation pits and below-grade tanks) - Visual inspection (certification) of the proposed site, Aerial photo, Satellite image	∐NA	ŀ
	Within 1000 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application.	Yes	No
	(Applied to permanent pits)	□NA	<u>ا</u>
İ	- Visual inspection (certification) of the proposed site, Aerial photo, Satellite image		
	Within 500 horizonal 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.	Yes	No
	- NM Office of the State Engineer - 1WATERS database search, Visual inspection (certification) of the proposed site.		
	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	Yes	□No
	- Written confirmation or verification from the municipality, Written approval obtained from the municipality Within 500 feet of a wetland.	Yes	□No
	- US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site		
	Within the area overlying a subsurface mine Written confirmation or verification or map from the NM EMNRD - Mining and Mineral Division	Yes	No
	Within an unstable area.	Yes	No
	- Engineering measures incorporated into the design; NM Bureau of Geology & Mineral Resources; USGS, NM Geological Society, Topographic map		
	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
String 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 or Permit
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
Previously Approved Operating and Maintenance Plan API
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 (I) 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 H2S, 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
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

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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 Disposal Facility Permit #	
Disposal Facility Name Disposal Facility Permit #	
Will any of the proposed closed-loop system operations and associated activities occur on or in areas that will not be used for future Yes (If yes, please provide the information No	
Required for impacted areas which will not be used for future service and operations Soil Backfill and Cover Design Specification - based upon the appropriate requirements of Subsection H of 19 15 17 13 NM. 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	AC
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 certain siting criteria may require administrative approval from the appropriate district office or may be considered an exception which must be submitted to 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
And Office of the State Engineer - Invitation database seatch, 0505 Data obtained from nearby from	
Ground water is between 50 and 100 feet below the bottom of the buried waste	Yes No
- NM Office of the State Engineer - IWATERS database search, USGS, Data obtained from nearby wells	∐N/A _
Ground water is more than 100 feet below the bottom of the buried waste	Yes No
- NM Office of the State Engineer - 1WATERS database search, USGS, Data obtained from nearby wells	∐N/A
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)	Yes No
- Topographic map, Visual inspection (certification) of the proposed site	
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
	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 fee of any other fresh water well or spring, in existence at the time of the initial application - NM Office of the State Engineer - iWATERS database, Visual inspection (certification) of the proposed site	
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	Yes No
 Written confirmation or verification from the municipality, Written approval obtained from the municipality Within 500 feet of a wetland 	Yes No
- US Fish and Wildlife Wetland Identification map, Topographic map, Visual inspection (certification) of the proposed site	
Within the area overlying a subsurface mine	Yes No
- Written confirantion or verification or map from the NM EMNRD-Mining and Mineral Division Within an unstable area	Yes No
- Engineering measures incorporated into the design, NM Bureau of Geology & Mineral Resources, USGS; NM Geological Society,	Yes No
Topographic map Within a 100-year floodplain	Yes No
- FEMA map	
On-Site Closure Plan Checklist: (19 15 17 13 NMAC) Instructions: Each of the following items must bee attached to the clos by a check mark in the box, that the documents are attached.	ure plan. Please indicate,
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	2
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 of Soil Cover Design - based upon the appropriate requirements of Subsection H of 19 15 17 13 NMAC 	annot be achieved)
Re-vegetation Plan - based upon the appropriate requirements of Subsection I of 19 15 17 13 NMAC	
Ste Reclamation Plan - based upon the appropriate requirements of Subsection G of 19 15 17 13 NMAC	

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Operator Application Certification: Thereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief Name (Print) Signature Date e-mail address Telephone OCD Approval: Permit Application (including closure plan) OCD Representative Signature: Approval Date: Title: OCD Permit Number: 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
Signature e-mail address Telephone 20 OCD Approval: Permit Application (including closure plan) OCD Representative Signature: Title: Approval Date: 7/33/2012 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
e-mail address Telephone 20 OCD Approval: Permit Application (including closure plan) Closure Plan (only). OCD Conditions (see attachment) OCD Representative Signature: Approval Date: 7/23/2012 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
20 OCD Approval: Permit Application (including closure plan) Closure Plan (only). OCD Conditions (see attachment) OCD Representative Signature: Title: 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
OCD Approval: Permit Application (including closure plan) Closure Plan (only). OCD Conditions (see attachment) OCD Representative Signature: Approval Date: 7/3/2012 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
OCD Representative Signature: Title: Closure Report (required within 60 days of closure completion): Instructions: Operators are required to obtain an approved closure plan prior to implementing any closure activities and submitting the closure report. The closure
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Instructions Operators are required to obtain an approved closure plan prior to implementing any closure activities and submitting the closure report. The closure
1 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
X Closure Completion Date: 6/20/2012
Closure Method:
Waste Excavation and Removal On-site Closure Method Alternative Closure Method X 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 Envirotech / JFJ Landfarm % IEI Disposal Facility Permit Number NM-01-0011 / NM-01-0010B
Disposal Facility Name Basin Disposal Facility Disposal Facility Permit Number NM-01-005
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 complilane to the items below)
Required for impacted areas which will not be used for future service and operations
Site Reclamation (Photo Documentation)
Soil Backfilling and Cover Installation Requestation Application Potes and Scoding Technique
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 (if applicable) 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
the closure complies with all applicable closure requirements and conditions specified in the approved closure plan
Name (Print) Dollie L. Busse 7 Title Staff Regulatory Technician
7/11/5
e-mail address dollie I busse@conocophillips.com Telephone (505) 324-6104
Operator Closure Certification: I hereby certify that the information and attachments submitted with this closure report is ture, 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) Dollie L Basse Title Staff Regulatory Technician Date 7//8//2