District I 1625 N French Dr., Hobbs, NM 88240

1301 W Grand Ave , Artesia, NM 88210

District III

State of New Mexico Energy Minerals and Natural Resources

> Department Oil Conservation Division 1220 South St. Francis Dr.

Form C-144 July 21, 2008

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

| 1000 Rio Brazos Rd , Aztec, NM 87410 District IV | Santa Fe, NM 87505 | For permanent pits and exceptions submit to the Santa Fe Environmental Bureau office and provide a copy to the appropriate NMOCD District Office |
|--------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1220 S St Francis Dr , Santa Fe, NM 87505 | losed-Loop System, Below-Gr | ade Tank or |
| | Iternative Method Permit or Cl | |
| \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | | • • |
|) ' ' | nit of a pit, closed-loop system, below-grad | |
| - | urc of a pit, closed-loop system, below-gra- | de tank, or proposed alternative method |
| | lification to an existing permit | |
| | ure plan only submitted for an existing per w-grade tank, or proposed alternative methor | mitted or non-permitted pit, closed-loop system, |
| | • | loop system, below-grade tank or alternative request |
| •• | • | ns result in pollution of surface water, ground water or the |
| | | able governmental authority's rules, regulations or ordinances |
| 1 | | 0.0000// 1.4520 |
| Operator: Burlington Resources Oil & Gas O | | OGRID#: <u>14538</u> |
| Address: PO Box 4289, Farmington, NM 8 | /499 | |
| Facility or well name: Grenier A 2R | | |
| API Number: 30-045-302 | | |
| U/L or Qtr/Qtr: <u>E(SW/NW)</u> Section: <u>34</u> | ' v _ | 10W County: San Juan |
| Center of Proposed Design: Latitude: | 36.77199 °N Longitude: _ | 107.87687 °W NAD: X 1927 1983 |
| Surface Owner: X Federal S | tate Private Tribal Trust or Inc | dian Allotment |
| Pit: Subsection F or G of 19.15 17 11 NMAC Temporary Drilling Workover | | RCVD OCT 4'12 |
| Permanent Emergency Cavitation | □P&A | OIL CONS. DIV. |
| 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 |
| Biller Scalifs Welded Tactory | Volume | bbl Dimensions Lx Wx D |
| 3 X Closed-loop System: Subsection H of 19 Type of Operation: X P&A Drilling a | | to activities which require prior approval of a permit or |
| Drying Pad X Above Ground Steel Ta | anks Haul-off Bins Other | |
| Lined Unlined Liner type | Thickness mil LLDPE | HDPE PVD Other |
| Liner Seams Welded Factory | Other | |
| 4 Below-grade tank: Subsection 1 of 19 15 1 | 7 11 NMAC | |
| Volume bbl T | ype of fluid | |
| Tank Construction material. | | |
| Secondary containment with leak detection | Visible sidewalls, liner, 6-inch lift and a | utomatic overflow shut-off |
| Visible sidewalls and liner Visi | ible sidewalls only Other | |
| Liner Type Thicknessmil | HDPE PVC Other | |
| 5 Alternative Method: | | |
| Submittal of an exception request is required Exc. | eptions must be submitted to the Santa Fe Envir | onmental Bureau office for consideration of approval |
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| 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, mistitution or church) Four foot height, four strands of barbed wire evenly spaced between one and four feet Alternate Please specify | | | | |
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| 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) | | | | |
| 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 | | | | |
| 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 consideration of approval (Fencing/BGT Liner) Exception(s) Requests must be submitted to the Santa Fe Environmental Bureau office for consideration of approval | | | | |
| Siting Criteria (regarding permitting): 19.15.17.10 NMAC Instructions: The applicant must demonstrate compliance for each siting criteria below in the application. Recommendations of acceptable source material are provided below. Requests regarding changes to certain siting criteria may require administrative approval from the appropriate district office or may be considered an exception which must be submitted to the Santa Fe Environmental Bureau Office for consideration of approval. Applicant must attach justification for request. Please refer to 19.15.17.10 NMAC for guidance. Siting criteria does not apply to drying pads or above grade-tanks associated with a closed-loop system. | | | | |
| Ground water is less than 50 feet below the bottom of the temporary pit, permanent pit, or below-grade tank. - NM Office of the State Engineer - iWATERS database search, USGS; Data obtained from nearby wells Within 200 feet of a continuous la Continuou | 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 | res | | | |
| Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application. | Yes | ∐No | | |
| (Applies to temporary, emergency, or cavitation pits and below-grade tanks) - Visual inspection (certification) of the proposed site; Aerial photo; Satellite image | ∐ ^{NA} | | | |
| Within 1000 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application. (Applied to permanent pits) | Yes | No | | |
| - 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 - 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, Topography, were | Yes | No | | |
| 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 Situng Criteria Compliance Demonstrations - based upon the appropriate requirements of 19 15.17.10 NMAC Design Plan - based upon the appropriate requirements of 19.15.17 11 NMAC Operating and Maintenance Plan - based upon the appropriate requirements of 19 15.17.12 NMAC Closure Plan (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 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 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 Previously Approved Operating Apic Apic Apic Apic Apic Apic Apic Apic |
| 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) |
| 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 G of 19 15 17.13 NMAC |

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|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|--------------------------|--|--|--|
| Waste Remoyal Closure For Closed-loop Systems That Utilize Above Ground Steel Tan Instructions Please identify the facility or facilities for the disposal of liquids, drilling fluids facilities are required | ks or Haul-off Bins Only: (19 15 17 13 D NMAC) and drill cuttings Use attachment if more than two | | | | |
| Disposal Facility Name Dispo | Disposal Facility Permit # | | | | |
| Disposal Facility Name Dispo | osal Facility Permit # | | | | |
| Will any of the proposed closed-loop system operations and associated activities occ Yes (If yes, please provide the information No | ur on or in areas that will not be used for future ser | rvice and | | | |
| 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 NMAC Re-vegetation Plan - based upon the appropriate requirements of Subsection G 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 | | Yes No | | | |
| - NM Office of the State Engineer - 1WATERS database search, USGS Data obtained to | from nearby wells | ∐N/A | | | |
| Ground water is between 50 and 100 feet below the bottom of the buried waste | | Yes No | | | |
| - NM Office of the State Engineer - 1WATERS database search, USGS, Data obtained for | rom 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 - iWATERS database search, USGS; Data obtained fi | rom nearby wells | □ _{N/A} □ | | | |
| Within 300 feet of a continuously flowing watercourse, or 200 feet of any other significant water (measured from the ordinary high-water mark) | atercourse or lakebed, sinkhole, or playa lake | Yes No | | | |
| Topographic map, Visual inspection (certification) of the proposed site | | | | | |
| Within 300 feet from a permanent residence, school, hospital, institution, or church in existen - Visual inspection (certification) of the proposed site, Aerial photo, satellite image | ice at the time of initial application | Yes No | | | |
| - visual hispection (certification) of the proposed site, retrial photo, satellite image | | □Yes □No | | | |
| Within 500 horizontal feet of a private, domestic fresh water well or spring that less than five purposes, or within 1000 horizontal fee of any other fresh water well or spring, in existence a - NM Office of the State Engineer - iWATERS database, Visual inspection (certification) | at the time of the initial application | | | | |
| Within incorporated municipal boundaries or within a defined municipal fresh water well field 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 | Tom the manierpanty | ∏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 confiramtion or verification or map from the NM EMNRD-Mining and Mineral | Division | | | | |
| Within an unstable area | Dansum HSCS NM Cooleying Society | ∐Yes ∐No | | | |
| - Engineering measures incorporated into the design, NM Bureau of Geology & Mineral Topographic map | Resources, USGS, NW Geological Society, | | | | |
| Within a 100-year floodplain - FEMA map | | Yes No | | | |
| 18 | | | | | |
| On-Site Closure Plan Checklist: (19 15 17 13 NMAC) Instructions: Each of the by a check mark in the box, that the documents are attached. | e following items must bee attached to the closure | e plan. Please indicate, | | | |
| Siting Criteria Compliance Demonstrations - based upon the appropriate requ | airements 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 1 of 19 15.17.13 NMAC | | | | | |
| Site Reclamation Plan - based upon the appropriate requirements of Subsection | | | | | |

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| 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 | | | |
| c-mail address: Telephone | | | |
| 20 OCD Approval: Permit Application (including closure plan) Closure Plan (only) OCD Conditions (see attachment) OCD Representative Signature: Approval Date: 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 approved closure plan has been obtained and the closure activities have been completed. [X] Closure Completion Date: 9/21/2012 | | | |
| 22 | | | |
| 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 | | | |
| 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 | | | |
| Re-vegetation Application Rates and Seeding Technique | | | |
| 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 | | | |
| | | | |
| 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 Busse Title Staff Regulatory Technician | | | |
| Signature. Date 10/3/12 | | | |
| e-mail address dollie l.busse@conocophillips.com Telephone (505) 324-6104 | | | |