## 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**

For drilling and production facilities, submit to appropriate NMOCD District Office. For downstream facilities, submit to Santa Fe

Form C-144

June 1, 2004

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

office

| Pit or Below-Gra  | de Tank Registration or Clo  | sure                                   |                                |
|---|--|--|--------------------------------|
|   | nk covered by a "general plan"? Yes<br>t or below-grade tank Closure of a pit or |  | a<br>a                         |
| Type of action. Registration of a pic   | tor below-grade talling Closure of a pit of                                      | below-grade tallk[2                    | <u> </u>                       |
| Operator: BURLINGTON RESOURCES OIL & GAS COMPANY LP Telephone:                        | 505-326-9700 e-mail address: asandova  | l@br-inc.com                           |                                |
| Address: 3401 E. 30TH STREET, FARMINGTON, NM 87402                                    | 33042  | Formatio                               | n: Fruitland Coal              |
| Facility or well name: San Juan 32-9 Unit 217S API #:                                 | 30-045- U/L or Qtr/Qtr 1 S   | Sec 16 T 32                            | N R 09W                        |
| County: San Juan Latitude 36.9817 Longitude   | 107.7775 NAD: 1927 X 1983 Surface  | e Owner Federal X                      | State Private Indian           |
| Pit   | Below-grade tank   | <del></del>                            |                                |
| Type: Drilling X Production Disposal  | Volume:bbl Type of fluid:  |  |                                |
| Workover Emergency  | Construction material:   |  |                                |
| Lined Unlined X   | Double-walled, with leak detection? Yes If If not, explain why not.              |  |                                |
| Liner type: Synthetic Thickness mil Clay  |  | ······································ |                                |
| Pit Volume bbl  |  |  |                                |
| Depth to ground water (vertical distance from bottom of pit to seasonal high          | Less than 50 feet  | (20 points)                            |                                |
| water elevation of ground water.)   | 50 feet or more, but less than 100 feet  | (10 points)                            | .0                             |
|   | 100 feet or more   | ( 0 points)                            |                                |
| Wellhead protection area: (Less than 200 feet from a private domestic                 | Yes  | (20 points)                            | _                              |
| water source, or less than 1000 feet from all other water sources.)                   | No   | ( 0 points)                            | 0                              |
| Distance to surface water: (horizontal distance to all wetlands, playas,              | Less than 200 feet   | (20 points)                            |                                |
| irrigation canals, ditches, and perennial and ephemeral watercourses.)                | 200 feet or more, but less than 1000 feet  | (10 points)                            | 0                              |
|   | 1000 feet or more  | ( 0 points)                            |                                |
| :   | Ranking Score (Total Points)   | 0                                      |                                |
| If this is a pit closure: (1) attach a diagram of the facility showing the pit's rela | ationship to other equipment and tanks. (2) Indicate                             | ate disposal location: (               | check the onsite box if        |
| your are burying in place) onsite X offsite I If offsite, name of facilit             | ty (3) Attach a g  | eneral description of re               | emedial action taken including |
| remediation start date and end date. (4) Groundwater encountered: No x Y              | es If yes, show depth below ground surface                                       | ft. and a                              | ttach sample results. (5)      |
| Attach soil sample results and a diagram of sample locations and excavations.         |  |  | 2777/3PV                       |
| Additional Comments:  |  | <u>A</u>                               | CCOLICO (8)                    |
| See attached well pad diagram for direction and distance of pit from well head        |  |  | (C)                            |
| Per BLM requirements this pit was lined.  |  |  |                                |
|   | · · · · · · · · · · · · · · · · · · ·  | is on                                  | CONTROL S                      |
|   |  | 15                                     | Dies Line N                    |
|   |  |  |                                |
|   |  | <b>%</b> 0                             | 4                              |
| I hereby certify that the information above is true and complete to the best of m     | _  |  |                                |
| been/will be constructed or closed according to NMOCD guidelines, a Date:             | general permit $[X]$ , or an (attached) altern                                   | ative OCD-approved                     | plan                           |
| Printed Name/Title Amanda Sandoval/Regulatory Assistant II                            | Signature Amunda Am  | ndoexel                                |                                |
| Your certification and NMOCD approval of this application/closure does not re         |  |  | -<br>aminate ground water or   |
| otherwise endanger public health or the environment. Nor does it relieve the op       | · · · · · · · · · · · · · · · · · · ·  | •                                      | •                              |
| regulations.  |  |  |                                |
| Approval:   |  | <u> </u>                               | 2                              |
| Printed Name/Title  | Signature ) Jerry  | Lett                                   | JAN 25 2006                    |
| Printed Name/Title  | Signature  |  | Date:                          |

