District 1
1625 N. French Dr., Hobbs, NM 88240
District 11
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

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

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

For downstream facilities, submit to Santa Fe office

Form C-144

June 1, 2004

Pit or 1	Below-	Grade '	<u>Tank</u>	Registi	ation	<u>or Closi</u>	ire

Is pit or below-grade tan Type of action: Registration of a pit	ak covered by a "general plan"? Yes 🔀 No or below-grade tank 🗌 Closure of a pit or below-gra	ade tank 🔀				
Operator: BP America Production Company Telephon Address: 200 Energy Ct, Farmington, NM 87401 Facility or well name: CORNELL A 1 API #: 3 County: San Juan Latitude Surface Owner: Federal State Private Indian		Sec_10T_29N_R_12W				
Pit Type: Drilling Production Disposal Workover Emergency Lined Unlined Liner type: Synthetic Thicknessmil Clay Pit Volumebbl	Below-grade tank Volume:bbl Type of fluid: Construction material: Double-walled, with leak detection? Yes					
Depth to ground water (vertical distance from bottom of pit to seasonal high water elevation of ground water.)	Less than 50 feet 50 feet or more, but less than 100 feet 100 feet or more	(20 points) (10 points) (0 points)				
Wellhead protection area: (Less than 200 feet from a private domestic water source, or less than 1000 feet from all other water sources.)	Yes No	(20 points) (0 points)				
Distance to surface water: (horizontal distance to all wetlands, playas, irrigation canals, ditches, and perennial and ephemeral watercourses.)	Less than 200 feet 200 feet or more, but less than 1000 feet 1000 feet or more	(20 points) (10 points) (0 points)				
	Ranking Score (Total Points)					
If this is a pit closure: (1) Attach a diagram of the facility showing the pit's relationship to other equipment and tanks. (2) Indicate disposal location: (check the onsite box if your are burying in place) onsite If offsite, name of facility						
Additional Comments:						
See Attached Documentation DEC 2005						
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that the above described in or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit , or an (attached) alternative OCD-approved plan .						
Date:						
Approval: Printed Name/Title DEPUTY OR & GAS INSPECTOR, DIST. & Signature Branch Dell Date: DEC 1 6 2005						