Form C-144 June 24, 2008

# State of New Mexico Energy Minerals and Natural Resources Department Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505

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

For permanent pits and exceptions submit to the Santa Fe Environmental Bureau office and provide a copy to the appropriate NMOCD District Office.

# Pit, Closed-Loop System, Below-Grade Tank, or Proposed Alternative Method Permit or Closure Plan Application

Type of action: Permit of a pit, closed-loop system, below-grade tank, or proposed alternative method

Closure of a pit, closed-loop system, below-grade tank, or proposed alternative method

Instructions: Please submit one application (Form C-144) per individual pit, closed-loop system, below-grade tank or alternative request

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 ordinance

environment. Nor does approval relieve the operator of its responsibility to com	oly with any other applicable governmental authority's rules, regulations or ordinances.	
Operator: Energen Resources Corporation	OGRID #: 162928 RCVD JUL 25 '08	
Address: 2010 Afton Place, Farmington, New Mexico 87401	OIL CONS. DIV.	
Facility or well name: Riddle B #224	<u> </u>	
API Number: 30-045-27077 OCD Permit Number:		
U/L or Qtr/Qtr I Section 27 Township	10N Range 10W County: San Juan	
Center of Proposed Design: Latitude 36.77984	Longitude107.86535 NAD: ☐1927 ☐ 1983	
Surface Owner:  Federal  State  Private Tribal Trust or Indian Allotment		
Pit: Subsection F or G of 19.15.17.11 NMAC	☐ Closed-loop System: Subsection H of 19.15.17.11 NMAC	
Temporary: Drilling Workover	☐ Drying Pad ☐ Tanks ☐ Haul-off Bins ☐ Other	
☐ Permanent ☐ Emergency ☐ Cavitation ☐ Steel Pit	☐ Lined ☑ Unlined	
Lined Unlined	Liner type: Thicknessmil	
Liner type: Thicknessmil	Other	
Other String-Reinforced	Seams: Welded Factory Other	
Seams: Welded Factory Other	Volume:bblyd <sup>3</sup>	
Volume:bbl Dimensions: Lx Wx D	Dimensions: Length 40 x Width 12	
Below-grade tank: Subsection I of 19.15.17.11 NMAC	Fencing: Subsection D of 19.15.17.11 NMAC	
Volume:bbl	Chain link, six feet in height, two strands of barbed wire at top	
Type of fluid:	☐ Four foot height, four strands of barbed wire evenly spaced between one and	
Tank Construction material:	four feet	
Secondary containment with leak detection	Netting: Subsection E of 19.15.17.11 NMAC	
☐ Visible sidewalls, liner, 6-inch lift and automatic overflow shut-off	☐ Screen ☐ Netting ☐ Other	
☐ Visible sidewalls and liner	Monthly inspections	
☐ Visible sidewalls only	Signs: Subsection C of 19.15.17.11 NMAC	
Other	12'x24', 2' lettering, providing Operator's name, site location, and	
Liner type: Thickness mil HDPE PVC	emergency telephone numbers	
Other	Signed in compliance with 19.15.3.103 NMAC	
Alternative Method:	Administrative Approvals and Exceptions:	
Submittal of an exception request is required. Exceptions must be submitted to the Santa Fe Environmental Bureau office for consideration	Justifications and/or demonstrations of equivalency are required. Please refer to 19.15.17 NMAC for guidance.	
of approval.	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 or the Santa Fe Environmental Bureau office for	
	consideration of approval.	
	Exception(s): Requests must be submitted to the Santa Fe Environmental Bureau office for consideration of approval.	
	- PE	

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 significant watercourse or lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark).  - Topographic map; Visual inspection (certification) of the proposed site	☐ Yes ☐ No
Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application.  (Applies to temporary, emergency, or cavitation pits and below-grade tanks)  - Visual inspection (certification) of the proposed site; Aerial photo; Satellite image	☐ Yes ☐ No ☐ NA
Within 1000 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application.  (Applies to permanent pits)  - Visual inspection (certification) of the proposed site; Aerial photo; Satellite image	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 feet of any other fresh water well or spring, in existence at the time of initial application.  - NM Office of the State Engineer - iWATERS database search; Visual inspection (certification) of the proposed site	Yes No
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
<ul> <li>Within an unstable area.</li> <li>Engineering measures incorporated into the design; NM Bureau of Geology &amp; Mineral Resources; USGS; NM Geological Society; Topographic map</li> </ul>	☐ Yes ☐ No
Within a 100-year floodplain. - FEMA map	☐ Yes ☐ No
Temporary Pits, Emergency Pits, and Below-grade Tanks Permit Application Attachment Checklist: Subsection B of 19.15.17.91  Instructions: Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the do 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 19.15.17.1   Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC   Design Plan - based upon the appropriate requirements of 19.15.17.12 NMAC   Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.19 NMAC and 19.15.17.13 NMAC   Previously Approved Design (attach copy of design) API Number: or Permit Number:	9 NMAC
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 do attached.  Geologic and Hydrogeologic Data (required for on-site closure) - based upon the requirements of Paragraph (3) of Subsection B of Siting Criteria Compliance Demonstrations (required for on-site closure) - based upon the appropriate requirements of 19.15.17.11 NMAC  Design Plan - based upon the appropriate requirements of 19.15.17.12 NMAC  Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.9 NMAC and 19.15.17.13 NMAC  NMAC	19.15.17.9
Previously Approved Design (attach copy of design) API Number:	

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 do	cuments are
attached.  Hydrogeologic Report - based upon the requirements of Paragraph (1) 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	
<ul> <li>Nuisance or Hazardous Odors, including H₂S, Prevention Plan</li> <li>Emergency Response Plan</li> <li>Oil Field Waste Stream Characterization</li> <li>Monitoring and Inspection Plan</li> </ul>	
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	
Proposed Closure: 19.15.17.13 NMAC	
Type: ☑ Drilling ☐ Workover ☐ Emergency ☐ Cavitation ☐ 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 Burial	
☐ Alternative Closure Method (Exceptions must be submitted to the Santa Fe Environmental Bureau for cor	nsideration)
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.  - NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells	☐ Yes ☐ No ☐ NA
Ground water is between 50 and 100 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 ☐ NA
Ground water is more than 100 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 ☐ NA
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).  - Topographic map; Visual inspection (certification) of the proposed site	☐ Yes ☐ No
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
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 feet of any other fresh water well or spring, in existence at the time of initial application.  - NM Office of the State Engineer - iWATERS database; Visual inspection (certification) of the proposed site	☐ Yes ☐ No
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; Topographic map	☐ Yes ☐ No
Within a 100-year floodplain FEMA map	☐ Yes ☐ No

	3 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 doct	
Protocols and Procedures - based upon the appropriate requiremen	
☐ Confirmation Sampling Plan (if applicable) - based upon the approximation Disposal Facility Name and Permit Number (for liquids, drilling fl	opriate requirements of Subsection F of 19.15.17.13 NMAC
Soil Backfill and Cover Design Specifications - based upon the ap	propriate requirements of Subsection H of 19 15 17 13 NMAC
Re-vegetation Plan - based upon the appropriate requirements of S	
Site Reclamation Plan - based upon the appropriate requirements of	
Wasta Bamayal Clasura Fay Classed loop Systems That Helliga Hayl	off Bins Only: (19.15.17.13.D NMAC) Instructions: Please indentify the facility
or facilities for the disposal of liquids, drilling fluids and drill cuttings.	
Disposal Facility Name: Auga Moss / Envirotech	Disposal Facility Permit Number: NM-01-0011
	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.  Siting Criteria Compliance Demonstrations - based upon the approximately approximately actions - based upon the approximately - ba	anniate requirements of 10.15.17.10 NIMAC
Proof of Surface Owner Notice - based upon the appropriate requir	
Construction and Design of Burial Trench (if applicable) based up	
Protocols and Procedures - based upon the appropriate requiremen	
Confirmation Sampling Plan (if applicable) - based upon the appro	
Waste Material Sampling Plan - based upon the appropriate requir	
	uids and drill cuttings or in case on-site closure standards cannot be achieved)
☐ Soil Cover Design - based upon the appropriate requirements of Soil Re-vegetation Plan - based upon the appropriate requirements of Soil Re-vegetation Plan - based upon the appropriate requirements of Soil Re-vegetation Plan - based upon the appropriate requirements of Soil Re-vegetation Plan - based upon the appropriate requirements of Soil Re-vegetation Plan - based upon the appropriate requirements of Soil Re-vegetation Plan - based upon the appropriate requirements of Soil Re-vegetation Plan - based upon the appropriate requirements of Soil Re-vegetation Plan - based upon the appropriate requirements of Soil Re-vegetation Plan - based upon the appropriate requirements of Soil Re-vegetation Plan - based upon the appropriate requirements of Soil Re-vegetation Plan - based upon the appropriate requirements of Soil Re-vegetation Plan - based upon the appropriate requirements of Soil Re-vegetation Plan - based upon the appropriate requirements of Soil Re-vegetation Plan - based upon the appropriate requirements of Soil Re-vegetation Plan - based upon the appropriate requirements of Soil Re-vegetation Plan - based upon the appropriate requirements of Soil Re-vegetation Plan - based upon the appropriate requirements of Soil Re-vegetation Plan - based upon the appropriate requirements of Soil Re-vegetation Plan - based upon the appropriate requirements of Soil Re-vegetation Plan - based upon the appropriate requirements of Soil Re-vegetation Plan - based upon the appropriate requirements of Soil Re-vegetation Plan - based upon the appropriate requirements of Soil Re-vegetation Plan - based upon the appropriate requirements of Soil Re-vegetation Plan - based upon the appropriate requirements of Soil Re-vegetation Plan - based upon the appropriate requirements of Soil Re-vegetation Plan - based upon the appropriate requirements of Soil Re-vegetation Plan - based upon the appropriate requirements of Soil Re-vegetation Plan - based upon the appropriate requirements of Soil Re-vegetation Plan - based upon the appropr	
Site Reclamation Plan - based upon the appropriate requirements of	
Operator Application Certification:	
I hereby certify that the information submitted with this application is true	ue, accurate and complete to the best of my knowledge and belief.
Name (Print): Kirt Snyder	Title: <u>District Engineer</u>
Name (1 lint). Kirt Sayder	
Signature:	Date: 7/24/2009
Signature.	Date
	T. I
e-mail address: Venyder/d)energen com	
e-mail address: ksnyder@energen.com	Telephone: (505) 793-7614
e-mail address: ksnyder@energen.com  OCD Approval: Permit Application (including closure plan)  C	
OCD Approval: Permit Application (including closure plan)	Closure Plan (only)
OCD Approval: Permit Application (including closure plan)	
OCD Approval: Permit Application (including closure plan)  OCD Representative Signature:	Approval Date: 8-4-08
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OCD Approval: Permit Application (including closure plan) COOCD Representative Signature: Black Spect	Approval Date: 8-4-08  OCD Permit Number:
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OCD Approval: Permit Application (including closure plan) COOCD Representative Signature: Black Sell Title: Environ Spect  Closure Report (required within 60 days of closure completion): Sur	Approval Date: 8-4-08  OCD Permit Number:
OCD Approval: Permit Application (including closure plan) COOCD Representative Signature: Black Spect	Approval Date: 8-4-08  OCD Permit Number:
OCD Approval: Permit Application (including closure plan) COOCD Representative Signature: Spect  Closure Report (required within 60 days of closure completion): Successive Method:	Approval Date: 8-4-08  OCD Permit Number:
OCD Approval: Permit Application (including closure plan)  OCD Representative Signature:   Title:   Closure Report (required within 60 days of closure completion): Su  Closure Method:  Waste Excavation and Removal  On-Site Closure Method  If different from approved plan, please explain.	Approval Date: 8-4-08  OCD Permit Number:  bsection K of 19.15.17.13 NMAC  Closure Completion Date:  Alternative Closure Method
OCD Approval: Permit Application (including closure plan)  OCD Representative Signature:   Title:   Closure Report (required within 60 days of closure completion): Su  Closure Method:  Waste Excavation and Removal  On-Site Closure Method  If different from approved plan, please explain.  Closure Report Attachment Checklist: Instructions: Each of the follows	Approval Date: 8-4-08  OCD Permit Number:
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OCD Approval: Permit Application (including closure plan)   OCD Representative Signature:   Sept.  Closure Report (required within 60 days of closure completion): Su  Closure Method:   On-Site Closure Method   If different from approved plan, please explain.  Closure Report Attachment Checklist: Instructions: Each of the followark in the box, that the documents are attached.  Proof of Closure Notice   Proof of Deed Notice (if applicable)   Plot Plan   Confirmation Sampling Analytical Results	Approval Date: 8-4-08  OCD Permit Number:  bsection K of 19.15.17.13 NMAC  Closure Completion Date:  Alternative Closure Method
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OCD Approval: Permit Application (including closure plan)   OCD Representative Signature:   Sept.  Title:   Sept.  Closure Report (required within 60 days of closure completion): Su  Closure Method:   On-Site Closure Method   If different from approved plan, please explain.  Closure Report Attachment Checklist: Instructions: Each of the foll mark in the box, that the documents are attached.  Proof of Closure Notice   Proof of Deed Notice (if applicable)   Plot Plan   Confirmation Sampling Analytical Results   Waste Material Sampling Analytical Results   Disposal Facility Name and Permit Number	Approval Date: 8-4-08  OCD Permit Number:  bsection K of 19.15.17.13 NMAC  Closure Completion Date:  Alternative Closure Method
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OCD Approval: Permit Application (including closure plan)   OCD Representative Signature:   Sept.  Title:   Sept.  Closure Report (required within 60 days of closure completion): Su  Closure Method:   On-Site Closure Method   If different from approved plan, please explain.  Closure Report Attachment Checklist: Instructions: Each of the followark in the box, that the documents are attached.  Proof of Closure Notice   Proof of Deed Notice (if applicable)   Plot Plan   Confirmation Sampling Analytical Results   Waste Material Sampling Analytical Results   Disposal Facility Name and Permit Number   Soil Backfilling and Cover Installation   Re-vegetation Application Rates and Seeding Technique	Approval Date: 8-4-08  OCD Permit Number:  bsection K of 19.15.17.13 NMAC  Closure Completion Date:  Alternative Closure Method
OCD Approval: Permit Application (including closure plan)   OCD Representative Signature:   Sept.  Title:   Closure Report (required within 60 days of closure completion): Su  Closure Method:   On-Site Closure Method   If different from approved plan, please explain.  Closure Report Attachment Checklist: Instructions: Each of the followark in the box, that the documents are attached.  Proof of Closure Notice   Proof of Deed Notice (if applicable)   Plot Plan   Confirmation Sampling Analytical Results   Waste Material Sampling Analytical Results   Disposal Facility Name and Permit Number   Soil Backfilling and Cover Installation   Re-vegetation Application Rates and Seeding Technique   Site Reclamation (Photo Documentation)	Approval Date: 8-4-8  OCD Permit Number: bsection K of 19.15.17.13 NMAC Closure Completion Date: Alternative Closure Method  Cowing items must be attached to the closure report. Please indicate, by a check
OCD Approval: Permit Application (including closure plan)   OCD Representative Signature:   Spect  Closure Report (required within 60 days of closure completion): Su  Closure Method:   On-Site Closure Method   On-Site Closure Method   If different from approved plan, please explain.  Closure Report Attachment Checklist: Instructions: Each of the followark in the box, that the documents are attached.   Proof of Closure Notice   Proof of Deed Notice (if applicable)   Plot Plan   Confirmation Sampling Analytical Results   Waste Material Sampling Analytical Results   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	Approval Date: 8-4-8  OCD Permit Number: bsection K of 19.15.17.13 NMAC Closure Completion Date: Alternative Closure Method  Nowing items must be attached to the closure report. Please indicate, by a check
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OCD Approval: Permit Application (including closure plan)   OCD Representative Signature:   Spect  Closure Report (required within 60 days of closure completion): Su  Closure Method:   On-Site Closure Method   On-Site Closure Method   If different from approved plan, please explain.  Closure Report Attachment Checklist: Instructions: Each of the followark in the box, that the documents are attached.   Proof of Closure Notice   Proof of Deed Notice (if applicable)   Plot Plan   Confirmation Sampling Analytical Results   Waste Material Sampling Analytical Results   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   Operator Closure Certification:	Approval Date: 8-4-08  OCD Permit Number:
OCD Approval: Permit Application (including closure plan)    OCD Representative Signature:    Title:    Closure Report (required within 60 days of closure completion): Su  Closure Method:    The struction of Closure Method    The struction of the following of Closure Notice    Proof of Closure Notice    Proof of Deed Notice (if applicable)    Soil Backfilling and Cover Installation    Re-vegetation Application Rates and Seeding Technique    Site Reclamation (Photo Documentation)    On-site Closure Certification:    I hereby certify that the information and attachments submitted with this belief. I also certify that the closure complies with all applicable closure	Approval Date: \$\sum_{-4-\infty}\$  OCD Permit Number:
OCD Approval: Permit Application (including closure plan)    OCD Representative Signature:    Title:    Closure Report (required within 60 days of closure completion): Su  Closure Method:    Waste Excavation and Removal    On-Site Closure Method    If different from approved plan, please explain.  Closure Report Attachment Checklist: Instructions: Each of the followark in the box, that the documents are attached.  Proof of Closure Notice    Proof of Deed Notice (if applicable)    Plot Plan    Confirmation Sampling Analytical Results    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    Operator Closure Certification:  I hereby certify that the information and attachments submitted with this	Approval Date: \$\sum_{-4-\infty}\$  OCD Permit Number:
OCD Approval: Permit Application (including closure plan)    OCD Representative Signature:    Closure Report (required within 60 days of closure completion): Su  Closure Method:    On-Site Closure Method    If different from approved plan, please explain.  Closure Report Attachment Checklist: Instructions: Each of the followark in the box, that the documents are attached.    Proof of Closure Notice    Proof of Deed Notice (if applicable)    Plot Plan    Confirmation Sampling Analytical Results    Waste Material Sampling Analytical Results    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    Operator Closure Certification:  I hereby certify that the information and attachments submitted with this belief. I also certify that the closure complies with all applicable closure Name (Print):	Approval Date: 8-4-08  OCD Permit Number: bsection K of 19.15.17.13 NMAC Closure Completion Date: Alternative Closure Method  National Method Items must be attached to the closure report. Please indicate, by a check of the closure report is true, accurate and complete to the best of my knowledge and requirements and conditions specified in the approved closure plan.  Title:
OCD Approval: Permit Application (including closure plan)    OCD Representative Signature:    Title:    Closure Report (required within 60 days of closure completion): Su  Closure Method:    The structure of the following plants of the following	Approval Date: 8-4-08  OCD Permit Number:
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### **Closed-loop Design Plan:**

Our closed loop system will not entail a drying pad, temporary pit, below grade tank or sump. It will entail an above ground tank suitable for holding the cuttings and fluids for rig operations. The tank will be of sufficient volume to maintain a safe free board between disposal of the liquids and solids from rig operations.

- 1) Fencing is not required for an above ground closed-loop system.
- 2) It will be signed in compliance with 19.15.3.103 NMAC.
- 3) A frac tank will be on location to store fresh water.

# **Closed-loop Operating and Maintenance Plan:**

The closed-loop tank will be operated and maintained; to contain liquids and solids, to aid in the prevention of contamination of fresh water sources, in order to protect public health and the environment. To attain this goal the following steps will be followed:

- 1) The liquids will be vacuumed out and disposed of at the Agua Moss Pretty Lady #1 facility (Disposal API Number 30-048-30922). Solids in the closed-loop tank will be vacuumed out and disposed of at Envirotech (Permit Number NM-01-0011) on a periodic basis to prevent over topping.
- 2) No hazardous waste, miscellaneous solid waste or debris will be discharged into or stored in the tank. Only fluids or cuttings used or generated by rig operations will be placed or stored in the tank.
- 3) The division district office will be notified within 48 hours of the discovery of compromised integrity of the closed-loop tank. Upon the discovery of the compromised tank, repairs will be enacted immediately.
- 4) All of the above operations will be inspected and a log will be signed and dated. During rig operations the inspection will be daily.

## **Closed-loop Closure Plan:**

The closed loop tank will be closed in accordance with 19.15.17.13. This will be done by transporting cuttings and all remaining sludge to Envirotech (Permit Number NM-01-0011) following rig operations. All remaining liquids will be transported and disposed of in the Agua Moss Pretty Lady #1 facility (Disposal API number 30-048-30922). The tanks will be removed from the location as part of the rig move. At time of well abandonment, the site will be reclaimed and re-vegetated to pre-existing conditions when possible.