

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

Form C-144 CLEZ  
July 21, 2008

For closed-loop systems that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure, submit to the appropriate NMOCD District Office.

2593

**Closed-Loop System Permit or Closure Plan Application**

(that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure)

Type of action: ☒ Permit ☐ Closure

**Instructions:** Please submit one application (Form C-144 CLEZ) per individual closed-loop system request. For any application request other than for a closed-loop system that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure, please submit a Form C-144.

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 ordinances.

|                                                                                                                                                                                      |  |                          |                        |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------|------------------------|
| 1. Operator: <u>Dugan Production Corp</u>                                                                                                                                            |  | OGRID #: <u>006515</u>   | <u>RCVD NOV 24 '08</u> |
| Address: <u>P.O. Box 320 Farmington, NM 87499</u>                                                                                                                                    |  | <u>OIL CONS. DIV.</u>    |                        |
| Facility or well name: <u>Celsius 1</u>                                                                                                                                              |  | <u>WELL 2</u>            |                        |
| API Number: <u>3003923191</u>                                                                                                                                                        |  | OCD Permit Number: _____ |                        |
| U/L or Qtr/Qtr <u>H</u> Section <u>14</u> Township <u>23N</u> Range <u>6W</u> County: <u>Rio Arriba</u>                                                                              |  |                          |                        |
| Center of Proposed Design: Latitude <u>36.22743</u> Longitude <u>197.43068</u> NAD: <input checked="" type="checkbox"/> 1927 <input type="checkbox"/> 1983                           |  |                          |                        |
| Surface Owner: <input checked="" type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> Private <input type="checkbox"/> Tribal Trust or Indian Allotment |  |                          |                        |

|                                                                                                                                                                                                                                    |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| 2. <input checked="" type="checkbox"/> <b>Closed-loop System:</b> Subsection H of 19.15.17.11 NMAC                                                                                                                                 |  |
| Operation: <input type="checkbox"/> Drilling a new well <input checked="" type="checkbox"/> Workover or Drilling (Applies to activities which require prior approval of a permit or notice of intent) <input type="checkbox"/> P&A |  |
| <input checked="" type="checkbox"/> Above Ground Steel Tanks or <input type="checkbox"/> Haul-off Bins                                                                                                                             |  |

|                                                                                                                                       |  |
|---------------------------------------------------------------------------------------------------------------------------------------|--|
| 3. <b>Signs:</b> Subsection C of 19.15.17.11 NMAC                                                                                     |  |
| <input checked="" type="checkbox"/> 12"x 24", 2" lettering, providing Operator's name, site location, and emergency telephone numbers |  |
| <input checked="" type="checkbox"/> Signed in compliance with 19.15.3.103 NMAC                                                        |  |

|                                                                                                                                                                            |                   |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|
| 4. <b>Closed-loop Systems Permit Application Attachment Checklist:</b> Subsection B of 19.15.17.9 NMAC                                                                     |                   |
| <b>Instructions:</b> 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.        |                   |
| <input checked="" type="checkbox"/> Design Plan - based upon the appropriate requirements of 19.15.17.11 NMAC                                                              |                   |
| <input checked="" type="checkbox"/> Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC                                           |                   |
| <input checked="" type="checkbox"/> Closure Plan (Please complete Box 5) - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC |                   |
| <input type="checkbox"/> Previously Approved Design (attach copy of design)                                                                                                | API Number: _____ |
| <input type="checkbox"/> Previously Approved Operating and Maintenance Plan                                                                                                | API Number: _____ |

|                                                                                                                                                                                                                                                                                      |                                                    |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|
| 5. <b>Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only:</b> (19.15.17.13.D NMAC)                                                                                                                                            |                                                    |
| <b>Instructions:</b> 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: <u>Sanchez O'Brien 1 SWD</u>                                                                                                                                                                                                                                 | Disposal Facility Permit Number: <u>SWD-694</u>    |
| Disposal Facility Name: <u>IEI</u>                                                                                                                                                                                                                                                   | Disposal Facility Permit Number: <u>NM-01-001B</u> |
| Will any of the proposed closed-loop system operations and associated activities occur on or in areas that will not be used for future service and operations?<br><input type="checkbox"/> Yes (If yes, please provide the information below) <input checked="" type="checkbox"/> No |                                                    |
| Required for impacted areas which will not be used for future service and operations:                                                                                                                                                                                                |                                                    |
| <input type="checkbox"/> Soil Backfill and Cover Design Specifications -- based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC                                                                                                                                |                                                    |
| <input type="checkbox"/> Re-vegetation Plan - based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC                                                                                                                                                            |                                                    |
| <input type="checkbox"/> Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC                                                                                                                                                         |                                                    |

|                                                                                                                                              |                                |
|----------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|
| 6. <b>Operator Application Certification:</b>                                                                                                |                                |
| 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): <u>John Alexander</u>                                                                                                          | Title: <u>Vice President</u>   |
| Signature: <u>John Alexander</u>                                                                                                             | Date: <u>11/20/2008</u>        |
| e-mail address: <u>john.alexander@duganproduction.com</u>                                                                                    | Telephone: <u>505-325-1821</u> |

7. **OCD Approval:** ☒ Permit Application (including closure plan) ☐ Closure Plan (only)

OCD Representative Signature: Bob Bell Approval Date: 12-3-08

Title: Enviro Spec OCD Permit Number: \_\_\_\_\_

8. **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.*

☐ Closure Completion Date: \_\_\_\_\_

9. **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: \_\_\_\_\_ Disposal Facility Permit Number: \_\_\_\_\_

Disposal Facility Name: \_\_\_\_\_ Disposal Facility Permit Number: \_\_\_\_\_

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 compliance to the items below) ☐ No

*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

10. **Operator Closure Certification:**

I hereby certify that the information and attachments submitted with this closure report is true, 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): \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

e-mail address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Dugan Production Corp  
Closed Loop System Proposal  
Celsius 1  
14-23N-6W  
API 30-039-23191  
Workover

Closed-Loop Design Plan:

Dugan Production proposes to use a closed loop circulating system to contain well bore fluids generated during the workover procedure on the subject well. The system will not entail any drying pad, temporary pit, below grade tank or sump. The system will consist of an above ground tank with adequate volume to hold all fluid generated during the operation.

1. Fencing is not required for an above ground closed-loop system.
2. Signage in compliance with 19.15.3.103 NMAC will be present.
3. Water will be contained in a 500 bbl water tank or a water truck that will contain only fresh water.

Closed-Loop Operating and Maintenance Plan:

The subject closed-loop system will be operated and maintained to contain liquids and solids in order to prevent contamination of fresh water sources, and to protect public health and the environment. To ensure that the operation is maintained, the following steps will be followed:

1. The fluids will be vacuumed out and disposed of at the Dugan Production operated Sanchez O'Brien 1 SWD (permit SWD-694) located 1650' fsl and 990' fwl L-Sec.6-Twn.24N-Rng.9W. Solids in the closed loop system will be vacuumed out and disposed of at either the Envirotech facility (permit NM-01-0011) located in Sec.6-Twn.26N-Rng.10W or the IEI facility (permit NM-01-0010B) located in Sec.2-Twn.29N-Rng.12W.
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 operations associated with this procedure 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 begin immediately.
4. All the above operations will be inspected daily and a log will be signed and dated.

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 material to the Envirotech facility (permit NM-01-0011) located in Sec.6-Twn.26N-Rng.10W or the IEI facility (permit NM-01-0010B) located in Sec.2-Twn.29N-Rng.12W. All remaining liquids will be transported and disposed of at the Dugan Production operated Sanchez O'Brien 1 SWD (permit SWD-694) located 1650' fsl and 990' fwl L-Sec.6-Twn.24N-Rng.9W.