

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 NMOC District Office.

6047

**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.

|                                                                                                                                                                                      |                    |                             |                                                                             |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-----------------------------|-----------------------------------------------------------------------------|
| Operator: <u>Energen Resources Corporation</u>                                                                                                                                       |                    | OGRID #: <u>162928</u>      | RCVD MAY 3 '10                                                              |
| Address: <u>2010 Afton Place, Farmington, NM 87401</u>                                                                                                                               |                    | OIL CONSV. DIV.             |                                                                             |
| Facility or well name: <u>Eul Canyon SWD #1</u>                                                                                                                                      |                    | DIST. 3                     |                                                                             |
| API Number: <u>30-039-26214</u>                                                                                                                                                      |                    | OCD Permit Number: _____    |                                                                             |
| U/L or Qtr/Qtr: <u>M</u>                                                                                                                                                             | Section: <u>24</u> | Township: <u>32N</u>        | Range: <u>06W</u> County: <u>Rio Arriba</u>                                 |
| Center of Proposed Design: Latitude <u>36.96176</u>                                                                                                                                  |                    | Longitude <u>-107.41489</u> | NAD: <input type="checkbox"/> 1927 <input checked="" type="checkbox"/> 1983 |
| Surface Owner: <input type="checkbox"/> Federal <input type="checkbox"/> State <input checked="" type="checkbox"/> Private <input type="checkbox"/> Tribal Trust or Indian Allotment |                    |                             |                                                                             |

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| 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                                                                                                                             |  |

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| 3                                                                                                                          |  |
| <b>Signs:</b> Subsection C of 19.15.17.11 NMAC                                                                             |  |
| <input 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                                             |  |

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| 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: _____ |

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| 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>Carracas SWD #1</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Disposal Facility Permit Number: <u>30-039-24278</u> |
| Disposal Facility Name: <u>Envirotech</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Disposal Facility Permit Number: <u>NM-01-0011</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:<br><input type="checkbox"/> Soil Backfill and Cover Design Specifications - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC<br><input type="checkbox"/> Re-vegetation Plan - based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC<br><input type="checkbox"/> Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC |                                                      |

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| 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>Pat Sanchez</u>                                                                                                             | Title: <u>District Engineer</u> |
| Signature:                                                | Date: <u>5/3/2010</u>           |
| e-mail address: <u>psanchez@energen.com</u>                                                                                                  | Telephone: <u>505.324.4141</u>  |

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

OCD Representative Signature: Bd Bell

Approval Date: 5/3/10

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: \_\_\_\_\_

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**Closure Report Regarding Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only:**

*Instructions: Please indentify 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: \_\_\_\_\_

## Closed-Loop System Plan: Workover or P&A

In accordance with Rule 19.15.17 NMAC, the following plan describes the general Design, Operating & Maintenance, and Closure of the proposed Closed-Loop systems for this well.

### Closed-Loop Design Plan:

The Closed-Loops System will consist of one or more temporary above-ground steel tank(s) or waste pit(s) suitable for holding all cuttings and fluids circulated from the well during the planned rig operations. The tank(s) will be of sufficient volume to maintain a safe free-board between disposal of the liquids and solids from rig operations. Additional design considerations include:

1. This Closed-Loop System will not use a drying pad, temporary pit, below-grade tank or sump.
2. Fencing is not required for an above-ground closed-loop system.
3. It will be signed in compliance with 19.15.3.103 NMAC.
4. A frac tank will be on location to store fresh or KCl water.
5. Tanks will be placed on the active and disturbed areas of the well location and within the existing ROW footprint.

### Closed-Loop Operating Plan:

The Closed-Loops System 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. The following steps will be followed to attain this goal:

1. The liquids in the steel tank(s) will be vacuumed out and disposed of at one of the following facilities depending on the proximity of the well and the disposal volumes: Carracas SWD #1 (API 30-039-24278); Carracas SWD #2 (API 30-039-30148); Carson SWD #1 (API 30-039-26868); Eul Canyon SWD #1 (API 30-039-26214).
2. Solids in the Closed-Loop tank will be vacuumed out and disposed of at one of the following facilities depending on the proximity of the well and the disposal volumes: Envirotech (Permit Number NM-01-0011); Industrial Ecosystems Inc (Permit NM 1-10-B) or T-N-T Environmental (NM 01-008) on a periodic basis as necessary to prevent over topping.
3. No hazardous waste, miscellaneous solid waste or debris will be discharged into or stored in the tank(s). Only fluids or cutting intrinsic to, used or generated by rig operations will be placed or stored in the tank(s).
4. The Division District office will be notified within 48 hours of the discovery of compromised integrity of the Closed-Loop System. Upon discovery of the compromised tank, repairs will be enacted immediately.
5. All of the above operations will be inspected each day, signed and dated and any irregularities will be recorded. During rig operations the inspection will be daily.

### Closed-Loop Closure Plan:

The Closed-Loops System will be closed in accordance with 19.15.17.13. This will be done by:

1. Transport for disposal all remaining liquids to one of the following facilities depending on the proximity of the disposal well and disposal volumes: Carracas SWD #1 (API 30-039-24278); Carracas SWD #2 (API 30-039-30148); Carson SWD #1 (API 30-039-26868); Eul Canyon SWD #1 (API 30-039-26214).
2. Transporting cuttings and all remaining sludge to an approved facility: Envirotech (Permit Number NM-01-0011); Industrial Ecosystems Inc (Permit NM 1-10-B) or T-N-T Environmental (NM 01-008) as reasonable as possible after the rig activities.
3. Removal of the tank(s) from the well location after the rig activities has been completed.
4. At the time of well abandonment, the site will be reclaimed and re-vegetated to pre-existing conditions when possible, or as stipulated by the landowner in a surface use agreement. Timing of reseeding, seed mix, and assessment of successful reclamation will be in compliance with conditions in APD.