District I
P.O. Box 1980, Hobbs, NM
District II
P.O. Drawer DD, Artesia, NM 88211
District III
1000 Rio Brazos Rd, Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

SUBMIT 1 COPY TO APPROPRIATE DISTRICT OFFICE AND 1 COPY TO SANTA FE OFFICE

Denny G. DEPUTY OIL & GAS INSPECTOR

(Revised 3/9/94)

NOV 14 1995

No C-134

PIT REMEDIATION AND CLOSURE REPORT

Approved

Operator: Hallwood Petroleum **Telephone:** (303)259-1374

Address: P.O. Box 378111 Denver, CO 80237

Facility Or: Well Name Yager #4

Location: Unit or Qtr/Qtr Sec P E 027 11/3/95 Sec 10 T 31 R 7 County San Juan

Pit Type: Separator ___ Dehydrator X Other & Tank

Land Type: BLM ___, State ___, Fee X, Other ___

Pit Location: (Attach diagram)

Pit dimensions: length 105', width 60', depth 15'

Reference: wellhead ___, other ___

Footage from reference: ___

Direction from reference: ___ Degrees ___ East North ___ of ___ West South ___

Depth To Ground Water (Vertical distance from contaminants to seasonal high water elevation of ground water)	Less than 50 feet (20 points) 50 feet to 99 feet (10 points) Greater than 100 feet (0 Points)	0
Wellhead Protection Area: (Less than 200 feet from a private domestic water source, or less than 1000 feet from all other water sources)	Yes (20 points) (NO) (0 points)	0
Distance To Surface Water: (Horizontal distance to perennial lakes, ponds, rivers, streams, creeks, irrigation canals and ditches)	Less than 200 feet (20 points) 200 feet to 1000 feet (10 points) Greater than 1000 feet (0 points)	0
	RANKING SCORE (TOTAL POINTS):	0

RECEIVED
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OIL CON. DIV.
DIST. 3

Date Remediation Started: _____ **Date Completed:** _____

Remediation Method: (Check all appropriate sections) **Excavation** ___ **Approx. cubic yards** _____

Landfarmed ___ **Insitu Bioremediation** ___

Other No remediation needed

Remediation Location: (ie. landfarmed onsite, name and location of offsite facility) **Onsite** ___ **Offsite** _____

General Description Of Remedial Action: No remediation needed

Sampling on pit was in Sandstone. Pit has been cut in Sandstone.

Ground Water Encountered: **No** X **Yes** ___ **Depth** _____

Final Pit: Closure Sampling: (if multiple samples, attach sample results and diagram of sample locations and depths)

Sample location See pit diagram

Sample depth 6" below bottom of pit

Sample date 05/24/94 **Sample time** _____

Sample Results

Benzene(ppm) 0.204 ppm

Total BTEX(ppm) 36.875 ppm

Field headspace(ppm) 132 ppm

TPH 4176 mg/kg

Ground Water Sample: **Yes** ___ **No** X (If yes, attach sample results)

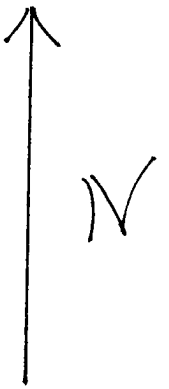
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF

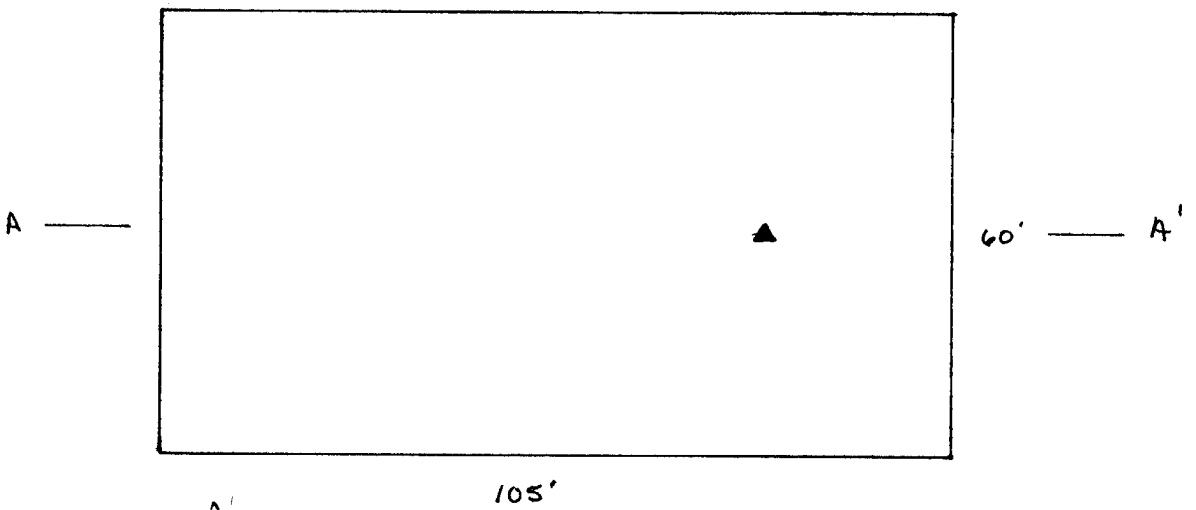
DATE 8-1-94

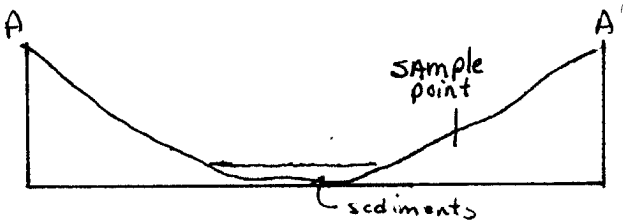
SIGNATURE [signature] PRINTED NAME AND TITLE Doug Elworthy (Land Rep)

YASER #4

Hallwood Petroleum Inc.
pit diagram







▲ – sample point

pit has been cut out of sandstone.

well has been P & A'd

○ well head P & A'd

ON SITE TECHNOLOGIES, LTD.

AROMATIC VOLATILE ORGANICS

Attn:	*Cindy Gray*	Date:	6/10/94
Company:	*On Site Technologies*	*Lab ID:*	*1549*
Address:	*657 W. Maple Std.*	*Sample ID:*	*1575*
City, State:	*Farmington, NM 87401*	*Job No.*	*4-1097*

Project Name:	***Hallwood Petroleum / Pit Assessments***				
Project Location:	***Yager #4 Dehy. Pit; Grab***				
Sampled by:	JL	Date:	6/1/94	Time:	15:15
Analyzed by:	DLA	Date:	6/10/94		
Sample Matrix:	*Soil*				

Aromatic Volatile Organics

Component	****Measured Concentration ug/kg***
Benzene	*204*
Toluene	*3,320*
Ethylbenzene	*2,276*
m,p-Xylene	*24,622*
o-Xylene	*6,453*
TOTAL	*36,875 ug/kg*

ND - Not Detectable
*** - Method Detection Limit, 2 ug/kg*

Method *- SW-846 EPA Method 8020 Aromatic Volatile Organics by Gas Chromatography*

Approved by: Bill Vandel
Date: 6/10/94

FAX: (505) 327-1496 ▪ 24 HR. – (505) 327-7105 ▪ OFF.: (505) 325-8786
3005 NORTHRIDGE DRIVE ▪ SUITE F ▪ P. O. BOX 2606 ▪ FARMINGTON, NEW MEXICO 87499

ON SITE TECHNOLOGIES, LTD.

QUALITY ASSURANCE REPORT

for EPA Method 8020

Date Analyzed: 6/10/94

Internal QC No.: 0222-STD
Surrogate QC No.: 0223-STD
Reference Standard QC No.: 0300-STD

Method Blank

Analytes in Blank	Amount
Average Amount of All Analytes In Blank	<1 ppb

Calibration Check

Calibration Standards	Units of Measure	*True Value	Analyzed Value	% Diff	Limit
Benzene	ppb	20	20	2	15%
Toluene	ppb	20	21	4	15%
Ethylbenzene	ppb	20	19	6	15%
m,p-Xylene	ppb	40	40	0	15%
o-Xylene	ppb	20	21	3	15%

Spike Results

Analyte	1- Percent Recovered	2 - Percent Recovered	Limit	%RSD	Limit
Benzene	99	95	(39-150)	3	20%
Toluene	95	94	(46-148)	1	20%
Ethylbenzene	95	93	(32-160)	2	20%
m,p-Xylene	96	94	(35-145)	1	20%
o-Xylene	94	93	(35-145)	1	20%

Surrogate Recoveries

Laboratory Identification	S1 Percent Recovered	S2 Percent Recovered	S3 Percent Recovered
Limits	(70-130)		
1574-1549	97		

S1: Flourobenzene

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ON SITE TECHNOLOGIES, LTD.

TOTAL PETROLEUM HYDROCARBONS

Attn: *Cindy Gray*
Company: *On Site Technologies*
Address: *657 W Maple St.*
City, State: *Farmington, NM 87401*

Date: 6/8/94
Lab ID: *1549*
Sample No.
Job No. *4-1097*

Project Name: ***Hallwood Petroleum / Pit Assessments***
Project Location: ***Yager #3 / #4***
Sampled by: JL Date: 6/1/94 Time: 1515
Analyzed by: TT Date: 6/6/94
Type of Sample: *Soil*

Laboratory Analysis

Laboratory Identification	***Sample Identification***	***Total Petroleum Hydrocarbons***
1574-1549	*Hallwood Petroleum / Pit Assessments* ***Yager #3 Dehy. Pit; Composite***	45 *mg/kg*
1575-1549	*Hallwood Petroleum / Pit Assessments* ***Yager #4 Dehy. Pit; Grab***	4176 *mg/kg*

Method - *EPA Method 418.1 Total Petroleum Hydrocarbons*

Approved by:
Date: 6/8/94

FAX: (505) 327-1496 ▪ 24 HR. – (505) 327-7105 ▪ OFF.: (505) 325-8786
3005 NORTHRIDGE DRIVE ▪ SUITE F ▪ P. O. BOX 2606 ▪ FARMINGTON, NEW MEXICO 87499

ON SITE TECHNOLOGIES LIMITED
657 W. Maple ▪ P. O. Box 2606 ▪ Farmington, NM 87499
LAB: (505) 325-5667 ▪ FAX: (505) 325-6256

CHAIN OF CUSTODY RECORD

№ 1545

Date: _____

Page _____ of _____

Purchase Order No.:	Reference No.: 4-1617	REPORT RESULTS TO	Name / Title
SEND INVOICE TO	Name		Company
	Company / Dept.		Mailing Address
	Address		City, State, Zip
	City, State, Zip		Telephone No. / Telefax No.
Special Instructions:		Number of Containers	ANALYSIS REQUESTED
Sampler:			

SAMPLE IDENTIFICATION	DATE/TIME SAMPLED	COMPOSITE/ GRAB	PRESERVATIVES	Number of Containers	Remarks (matrix)

Relinquished by:	Date/Time	Received by:	Date/Time 4/11/97
Relinquished by:	Date/Time	Received by:	Date/Time
Relinquished by:	Date/Time	Received by:	Date/Time

Method of Shipment:	Rush	5 Working Days	10 Working Days	Sampling Location:
Authorized by: _____ Date _____ (Client Signature Must Accompany Request)		✓		

Distribution: White – On Site Yellow – LAB Pink – Sampler Goldenrod – Client