



**Black Jack 1 Fed 2 Battery**  
API # 3001531864  
P-1 24S-30E (660 FSL & 660 FEL)

Production System: Closed

1) Oil sales by tank gauge to tank truck.

2) Seal requirements:

A. Production Phase: On all Tanks.

(1) All valves 5 sealed closed.

Sales Phase: On Tank being hauled.

(1) Valve 1 sealed closed.

(2) Valve 3 sealed closed.

(3) Valve 4 sealed closed.

(4) Valve 5 sealed closed.

(5) Misc. Valves: Plugged or otherwise inaccessible.

NOTE: Valve 2 is either a test or roll line if there is a valve 2 it will be sealed closed.

**Ledger for Site Diagram**

Valve #1: Production Line

Valve #2: Test or Roll line

Valve #3: Equalizer Line

Valve #4: Circ./Drain Line

Valve #5: Sales Line

Valve #6: BSW Load Line

Buried Lines:

Firewall:

Wellhead:

Stak-pak:

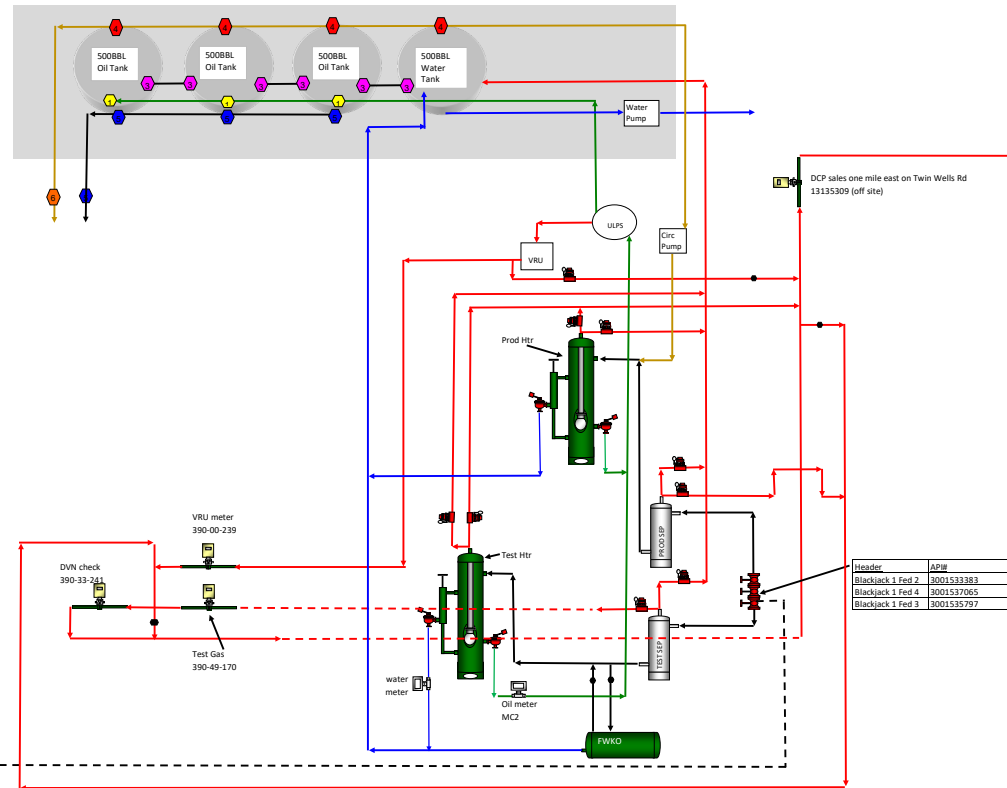
Production line:

Water line:

Gas Meter



Black Jack 1 Fed 2  
API: 3001531864  
Lat 32.245100  
Long -103.832100





**District I**

1625 N. French Dr., Hobbs, NM 88240  
Phone:(575) 393-6161 Fax:(575) 393-0720

**District II**

811 S. First St., Artesia, NM 88210  
Phone:(575) 748-1283 Fax:(575) 748-9720

**District III**

1000 Rio Brazos Rd., Aztec, NM 87410  
Phone:(505) 334-6178 Fax:(505) 334-6170

**District IV**

1220 S. St Francis Dr., Santa Fe, NM 87505  
Phone:(505) 476-3470 Fax:(505) 476-3462

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

QUESTIONS

Action 72934

**QUESTIONS**

Operator: HARVARD PETROLEUM COMPANY, LLC P.O. Box 936 Roswell, NM 88202	OGRID: 10155
	Action Number: 72934
	Action Type: [UF-FAC] TB Registration (TB-REG)

**QUESTIONS**

<b>Facility Details</b>	
<i>Please answer all of the questions in this group.</i>	
Name of the facility	BlackJack 1 Fed Battery
Date the facility was opened	Not answered.
Depth to ground water, if known	0

<b>Verification</b>	
Does the operator have other facilities with a matching name	No
Are there other facilites located within approximately 50 feet	No

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ACKNOWLEDGMENTS

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**ACKNOWLEDGMENTS**

<input checked="" type="checkbox"/>	I certify that I am authorized to register a facility on behalf of the responsible operator.
<input checked="" type="checkbox"/>	I certify that I will notify OCD of any changes of ownership for this facility.
<input checked="" type="checkbox"/>	I certify that I will notify OCD when this facility is closed.