HOBBS OCD State of New Mexico Energy Minerals and Natural Resources

Form C-141 Revised August 8, 2011

JAN 1 4 Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505 Submit 1 Copy to appropriate District Office in accordance with 19.15.29 NMAC.

Release Notification and Corrective Action

| 7 | OPERATOR | 🛛 Initial Report 🔲 Final Repor |
|-------------------------------|---------------|--------------------------------|
| Name of Company | Contact | |
| Yates Petroleum Corporation | Amber Cannon | |
| Address | Telephone No. | |
| 104 S. 4 th Street | 575-748-1471 | |
| Facility Name | Facility Type | |
| Hilliard B Federal #1 | Tank Battery | |
| <u> </u> | | |

| Surface Owner | Mineral Owner | API No. |
|---------------|---------------|--------------|
| Federal | Federal | 30-005-20987 |
| | | |

LOCATION OF RELEASE

| Unit Letter L | Section 26 | Township 15S | Range 30E | Feet from the 1980 | North/South Line South | Feet from the 460 | East/West Line West | County Chaves |
|------------------|---------------|-----------------|--------------|--------------------|---------------------------|----------------------|------------------------|------------------|
| | | | | | | | | |

Latitude 32.98501 Longitude 103.90212

NATURE OF RELEASE

| Type of Release | Volume of Release | Volume Recovered | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|--------------------------------------|--|--|--|
| Crude Oil | <u>.6 B/O</u> | 0 B/O | | | |
| Source of Release | Date and Hour of Occurrence | Date and Hour of Discovery | | | |
| Heater Treater | 1/4/2015; AM | 1/4/2015; AM | | | |
| Was Immediate Notice Given? | If YES, To Whom? | | | | |
| 🗌 Yes 🔲 No 🖾 Not Required | N/A | | | | |
| By Whom? | Date and Hour | | | | |
| N/A | N/A | | | | |
| Was a Watercourse Reached? | If YES, Volume Impacting the Wat | ercourse. | | | |
| 🗌 Yeś 🖾 No | .N/A | | | | |
| If a Watercourse was Impacted, Describe Fully. N/A | L | | | | |
| Describe Cause of Problem and Remedial Action Taken.* | | | | | |
| The gas line and BP valves froze on the heater treater and busted, causing the release. Well was shut off and roustabout crews were called. | | | | | |
| Describe Area Affected and Cleanup Action Taken.* | | | | | |
| An approximate area of 40' X 40' was affected. The well was shut down, production equipment was power washed and contaminated soils were removed | | | | | |
| Excavated soils will be hauled to a NMOCD approved facility. Vertical and horizontal delineation samples will be taken and analysis ran for TPH & | | | | | |
| BTEX. If initial analytical results for TPH & BTEX are under RRAL's (site ranking is 0) a Final Report, C-141 will be submitted to the OCD requesting | | | | | |
| closure. If the analytical results are above the RRAL's a work plan will be submitted to the OCD. Depth to Ground Water: > 100' (approximately | | | | | |
| 185', Section 26, T15S-R30E, per Trend Map), Wellhead Protection Area: No, Distance to Surface Water Body: >1000', SITE RANKING IS 0. | | | | | |
| I hereby certify that the information given above is true and complete to th | | | | | |
| regulations all operators are required to report and/or file certain release no | | | | | |
| public health or the environment. The acceptance of a C-141 report by the NMOCD marked as "Final Report" does not relieve the operator of liability should their operations have failed to adequately investigate and remediate contamination that pose a threat to ground water, surface water, human hea | | | | | |
| or the environment. In addition, NMOCD acceptance of a C-141 report does not relieve the operator of responsibility for compliance with any other | | | | | |
| federal, state, or local laws and/or regulations. | bes not renewe the operator of respons | sionity for compnance with any other | | | |
| | OU CONSERV | LATION DIVISION | | | |
| | OIL COMOLIK | CATION DIVISION | | | |
| Signature: (Muber (annon | 5-7 | | | | |
| | Approved by Environmental Speciali | st: | | | |
| Printed Name: Amber Cannon | Salen | | | | |
| | | | | | |
| Title: NM Environmental Regulatory Agent | Approval Date: 1-14-15 | Expiration Date: 3-14-15 | | | |
| E-mail Address: ACannon@yatespetroleum.com | Conditions of Approval: | | | | |
| | | Attached [] | | | |
| Date: January 13, 2015 Phone: 575-748-4111 | sinspla and f | 100 /00-3504 | | | |

* Attach Additional Sheets If Necessary

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