

**GW - 007**

**C-103s**

## Chavez, Carl J, EMNRD

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**From:** Chavez, Carl J, EMNRD  
**Sent:** Thursday, October 21, 2010 4:33 PM  
**To:** 'Parker, Ken'; Griswold, Jim, EMNRD; Hill, Larry, EMNRD  
**Cc:** Gonzales, Elidio L, EMNRD  
**Subject:** RE: LPG Storage Wells 1-4  
**Attachments:** MITs Annual 10-21-10).pdf

Ken:

Please find attached the OCD's signed approval for the C-103 MITs. OCD District Staff may stop by if they are in the area during your scheduled MITs.

The signed C-103s will be placed under the API# Well Summary under RBDMS and "GW-7- MITs" on OCD Online.

Please contact me if you have questions.

Thank you.

Carl J. Chavez, CHMM  
New Mexico Energy, Minerals & Natural Resources Dept.  
Oil Conservation Division, Environmental Bureau  
1220 South St. Francis Dr., Santa Fe, New Mexico 87505  
Office: (505) 476-3490  
Fax: (505) 476-3462  
E-mail: [CarlJ.Chavez@state.nm.us](mailto:CarlJ.Chavez@state.nm.us)  
Website: <http://www.emnrd.state.nm.us/ocd/index.htm>  
(Pollution Prevention Guidance is under "Publications")

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**From:** Parker, Ken [mailto:Ken.Parker@wnr.com]  
**Sent:** Thursday, October 21, 2010 11:35 AM  
**To:** Chavez, Carl J, EMNRD; Griswold, Jim, EMNRD; Hill, Larry, EMNRD  
**Subject:** LPG Storage Wells 1-4

Carl,

If you need anymore information let me know.

Ken

Submit 3 Copies To Appropriate District Office  
 District I  
 1625 N. French Dr., Hobbs, NM 88240  
 District II  
 1301 W. Grand Ave., Artesia, NM 88210  
 District III  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 May 27, 2004

OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

WELL API NO.	30-025-35954
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name State LPG Storage Well	
8. Well Number	I
9. OGRID Number	248440
10. Pool name or Wildcat	Salado

**SUNDRY NOTICES AND REPORTS ON WELLS**  
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well  Gas Well  Other LPG Storage

2. Name of Operator  
Western Refining Company, LP

3. Address of Operator  
PO Box 1345 Jal, New Mexico 88252

4. Well Location  
 Unit Letter M : 450 feet from the South line and 780 feet from the West line  
 Section 32 Township 23S Range 37E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

Pit or Below-grade Tank Application  or Closure

Pit type \_\_\_\_\_ Depth to Groundwater \_\_\_\_\_ Distance from nearest fresh water well \_\_\_\_\_ Distance from nearest surface water \_\_\_\_\_

Pit Liner Thickness: \_\_\_\_\_ mil Below-Grade Tank: Volume \_\_\_\_\_ bbls; Construction Material \_\_\_\_\_

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: _____	X	OTHER: _____	<input type="checkbox"/>

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Purpose: Annual MIT  
 Date Work Begins: 10-26-10  
 Date Completed: 10-27-10

Well one is currently empty of product and is brine water full. Western Refining Company will use mix butane to pressure the cavern above 500 pounds. A two pen pressure and temperature record will be utilized to record testing for a minimum of 24 hours.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines  a general permit  or an (attached) alternative OCD-approved plan .

SIGNATURE Ken Parker TITLE Manager DATE 10-21-10

Type or print name Ken Parker E-mail address: ken.parker@wnr.com Telephone No. 575-395-2632  
**For State Use Only**

APPROVED BY: Carl J. Chavez TITLE Environmental Engineer DATE 10/21/2010  
 Conditions of Approval (if any): \_\_\_\_\_

Submit 3 Copies To Appropriate District Office  
 District I  
 1625 N. French Dr., Hobbs, NM 88240  
 District II  
 1301 W. Grand Ave., Artesia, NM 88210  
 District III  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 May 27, 2004

OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

WELL API NO.	30-025-35955
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	State LPG Storage Well
8. Well Number	2
9. OGRID Number	248440
10. Pool name or Wildcat	Salado
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	

SUNDRY NOTICES AND REPORTS ON WELLS  
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well  Gas Well  Other LPG Storage

2. Name of Operator  
 Western Refining Company, LP

3. Address of Operator  
 PO Box 1345 Jal, New Mexico 88252

4. Well Location  
 Unit Letter M : 100 feet from the South line and 280 feet from the West line  
 Section 32 Township 23S Range 37E NMPM Lea County

Pit or Below-grade Tank Application  or Closure

Pit type \_\_\_\_\_ Depth to Groundwater \_\_\_\_\_ Distance from nearest fresh water well \_\_\_\_\_ Distance from nearest surface water \_\_\_\_\_

Pit Liner Thickness: \_\_\_\_\_ mil Below-Grade Tank: Volume \_\_\_\_\_ bbls; Construction Material \_\_\_\_\_

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK  PLUG AND ABANDON   
 TEMPORARILY ABANDON  CHANGE PLANS   
 PULL OR ALTER CASING  MULTIPLE COMPL

OTHER:

SUBSEQUENT REPORT OF:

REMEDIAL WORK  ALTERING CASING   
 COMMENCE DRILLING OPNS.  P AND A   
 CASING/CEMENT JOB

OTHER:

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Purpose: Annual MIT  
 Date Work Begins: 10-25-10  
 Date Work Completed: 10-26-10

Well two is currently empty of product and is brine water full. Western Refining Company will use normal butane to pressure the cavern above 500 pounds. A two pen pressure and temperature recorder will be utilized to record testing for a minimum of 24 hours.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit  or an (attached) alternative OCD-approved plan .

SIGNATURE Ken Parker TITLE Manager DATE 10-21-10

Type or print name Ken Parker E-mail address: ken.parker@wnr.com Telephone No. 575-395-2632

For State Use Only

APPROVED BY: [Signature] TITLE Environmental Engineer DATE 10/21/2010  
 Conditions of Approval (if any): \_\_\_\_\_

Submit 3 Copies To Appropriate District Office  
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 1625 N. French Dr., Hobbs, NM 88240  
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 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 May 27, 2004

OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

WELL API NO.	30-025-35956
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name State LPG Storage Well	
8. Well Number	3
9. OGRID Number	248440
10. Pool name or Wildcat	Langlie Mattix

**SUNDRY NOTICES AND REPORTS ON WELLS**  
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well  Gas Well  Other LPG Storage

2. Name of Operator  
Western Refining Company, LP

3. Address of Operator  
PO Box 1345 Jal, New Mexico 88252

4. Well Location  
 Unit Letter M : 1000 feet from the South line and 530 feet from the West line  
 Section 32 Township 23S Range 37E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

Pit or Below-grade Tank Application  or Closure

Pit type \_\_\_\_\_ Depth to Groundwater \_\_\_\_\_ Distance from nearest fresh water well \_\_\_\_\_ Distance from nearest surface water \_\_\_\_\_

Pit Liner Thickness: \_\_\_\_\_ mil Below-Grade Tank: Volume \_\_\_\_\_ bbls: Construction Material \_\_\_\_\_

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK  PLUG AND ABANDON   
 TEMPORARILY ABANDON  CHANGE PLANS   
 PULL OR ALTER CASING  MULTIPLE COMPL

OTHER:  X

SUBSEQUENT REPORT OF:

REMEDIAL WORK  ALTERING CASING   
 COMMENCE DRILLING OPNS.  P AND A   
 CASING/CEMENT JOB

OTHER:

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Purpose: Annual MIT  
 Date Work Begins: 10-23-10  
 Date Work Completed: 10-24-10

Well three currently has 24,700 barrels of normal butane in storage. Casing pressure is 640 pounds and the tubing pressure is 0. Casing pressure will be increased above 640 pound by injecting ten pound brine water into the tubing. Tubing pressure will be increased to 50 pounds. A two pen pressure and temperature recorder will be utilized to record testing for a minimum of 24 hours.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit  or an (attached) alternative OCD-approved plan .

SIGNATURE Ken Parker TITLE Manager DATE 10-21-10

Type or print name Ken Parker E-mail address: ken.parker@wnr.com Telephone No. 575-395-2632  
**For State Use Only**

APPROVED BY: Ken Parker TITLE Environmental Engineer DATE 10/21/2010  
 Conditions of Approval (if any):

Submit 3 Copies To Appropriate District Office  
 District I  
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 District IV  
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State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 May 27, 2004

OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

WELL API NO. 30-025-35957	
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name State LPG Storage Well	
8. Well Number	4
9. OGRID Number	248440
10. Pool name or Wildcat Langlie Mattix	

**SUNDRY NOTICES AND REPORTS ON WELLS**  
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well  Gas Well  Other LPG Storage

2. Name of Operator  
Western Refining Company, LP

3. Address of Operator  
PO Box 1345 Jal, New Mexico 88252

4. Well Location  
 Unit Letter M : 1000 feet from the South line and 1230 feet from the West line  
 Section 32 Township 23S Range 37E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

Pit or Below-grade Tank Application  or Closure

Pit type \_\_\_\_\_ Depth to Groundwater \_\_\_\_\_ Distance from nearest fresh water well \_\_\_\_\_ Distance from nearest surface water \_\_\_\_\_

Pit Liner Thickness: \_\_\_\_\_ mil Below-Grade Tank: Volume \_\_\_\_\_ bbls; Construction Material \_\_\_\_\_

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: _____	X	OTHER: _____	<input type="checkbox"/>

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Purpose: Annual MIT  
 Date Work Begins: 10-24-10  
 Date Work Completed: 10-25-10

Well four currently has 10,112 barrels of iso butane in storage. Casing pressure is 610 pounds and the tubing pressure is 0. Casing pressure will be increased above 610 pounds by injecting ten pound brine water into the tubing. Tubing pressure will be increased to 50 pounds. A two pen pressure and temperature recorder will be utilized to record testing for a minimum of 24 hours.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit  or an (attached) alternative OCD-approved plan .

SIGNATURE Ken Parker TITLE Manager DATE 10-21-10

Type or print name Ken Parker E-mail address: ken.parker@wnr.com Telephone No. 575-395-2632

**For State Use Only**

APPROVED BY: En Carl J. Chavez TITLE Environmental Engineer DATE 10/21/2010  
 Conditions of Approval (if any):

Submit 3 Copies To Appropriate District Office  
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State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 May 27, 2004

OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

WELL API NO.	30-025-35954
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name State LPG Storage Well	
8. Well Number	1
9. OGRID Number	248440
10. Pool name or Wildcat	Salado
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	

**SUNDRY NOTICES AND REPORTS ON WELLS**  
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well  Gas Well  Other LPG Storage

2. Name of Operator  
Western Refining Company, LP

3. Address of Operator  
PO Box 1345 Jal, New Mexico 88252

4. Well Location  
 Unit Letter M : 450 feet from the South line and 780 feet from the West line  
 Section 32 Township 23S Range 37E NMPM Lea County

Pit or Below-grade Tank Application  or Closure

Pit type \_\_\_\_\_ Depth to Groundwater \_\_\_\_\_ Distance from nearest fresh water well \_\_\_\_\_ Distance from nearest surface water \_\_\_\_\_

Pit Liner Thickness: \_\_\_\_\_ mil Below-Grade Tank: Volume \_\_\_\_\_ bbls; Construction Material \_\_\_\_\_

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Plugged Tubing

We have made several attempts to pump brine water down hole and failed. The initial thinking is the tubing is plugged with salt.

Friday 2, 2009

An attempt was made to use a kill truck to pump fresh water into the tubing and dissolve the salt plug.

Tuesday 5, 2009

Gray Wireline Service ran a density log and TD the well. We found the tubing was plugged at 1,807 feet.

Monday 12, 2009

The plan is to have Gray Wireline Service cut the tubing at 1,800 feet.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit  or an (attached) alternative OCD-approved plan .

SIGNATURE Ken Parker TITLE Manager DATE 1-8-09

Type or print name Ken Parker E-mail address: ken.parker@wnr.com Telephone No. 575-395-2632  
**For State Use Only**

APPROVED BY: Carl Chavez As ways price TITLE Environmental Engr DATE 1/9/09

Conditions of Approval (if any): w/ Attached Conditions!

**C-103 Christie Jal-4 State LPG Storage Well #1 (GW-07)  
API# 30-025-35954  
32-23S 37E (Lea County)**

**Conditions of Approval (1/9/2009)**

- 1) Evacuate all non-essential personnel from the premises during the procedure.
- 2) Assess and address any nearby ignition sources during the procedure.
- 3) Notify the New Mexico State Police Department and LEPCs or Fire Marshalls from the Jal and Lea County Fire Departments at least 1-hr. before the procedure. Provide a stand-down call afterward.
- 4) Station staff personnel at least 1-mile N and S along Hwy.-18 in the event traffic may need to be stopped.
- 5) Implement discharge permit and/or facility emergency response plan, i.e., nearest hospital facility, etc.