<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 District II 811 S. First St., 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

Form C-141 Revised August 8, 2011 Submit 1 Copy to appropriate District Office in accordance with 19.15.29 NMAC.

Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505

Release Notification and Corrective Action													
						OPERAT	TOR	Initia	al Report		Final Report		
Name of Company. Oxf Obit file.						Contact: Chris Jones							
Address: 102 S. Main St. Carlsbad, NM 88220						Telephone No.: 575-628-4121							
Facility Name: Red Tank 34 Federal #13						Facility Type: Well							
Surface Owner: Federal Mineral Owner:						API No.: 30-025-32761							
LOCATION OF RELEASE													
Unit Letter	Section	Township	Range	Feet from the		h/South Line Feet from the East/West Line County							
D	34	22S	32E	410'	North		990' West Lea						
Latitude 32.5645954 N Longitude -104.1504613 W													
NATURE OF RELEASE													
Type of Release: Mixed Fluids						Volume of Release: 3 bbls Oil & 10 bbls PW			Volume Recovered: 0 bbls				
Source of Release: Nipple on wellhead failure						Date and Hour of Occurrence			Date and Hour of Discovery				
Source of Release. Typpic on weinicad failure						2/11/2015			2/11/2015 @ 8:00 am				
Was Immediate Notice Given?						If YES, To Whom?							
☐ Yes ☐ No ☐ Not Required						Mike Bratcher & Heather Patterson @ NMOCD Jim Amos @ BLM							
By Whom? Kimberly Wilson							Hour: 2/18/2015				-		
Was a Watercourse Reached?						If YES, Volume Impacting the Watercourse.							
☐ Yes ⊠ No													
If a Watercourse was Impacted, Describe Fully.*													
RECEIVED													
By OCD; Dr. Oberding at 8:42 am, Apr 06, 2015													
Describe Cause of Problem and Remedial Action Taken.* The nipple on the wellhead failed due to internal corrosion causing a release of 3 barrels of oil and 10 barrels of produced water. No fluids were recovered. Talon/LPE was contracted to perform an initial site assessment and soil													
oil and 10 b	arrels of pi	oduced wate of analytica	r. No Ilui I results f	rom the initial so	ı. Taio il samp	ling event a	work plan was d	irafted a	and subsec	uently app	roved b	by the OCD	
and BLM.	pon receip	t of analytica	r courto x										
Describe Area Affected and Cleanun Action Taken.*													
The error offerted is around the wellhead measured approximately 30'x50'. Upon regulatory approval of the work plan, Talon/LPE mobilized													
personnel and equipment to excavate the impacted area in accordance with the work plan. All of the excavated material was hauled to an NMOCD approved solid waste disposal facility, the excavation was backfilled with caliche and contoured to match the surrounding location.													
I hereby certify that the information given above is true and complete to the best of my knowledge and understand that pursuant to NMOCD rules and													
I hereby cer	ify that the	information g	iven abov	e is true and comp .nd/or file certain r	lete to t	he best of my	knowledge and	understa	ına tnat pui tions for re	rsuant to Miv deases which	mav e	ndanger	
nublic healt	or the env	ironment Th	e accentan	ce of a C-141 repo	ort by th	e NMOCD n	narked as "Final I	Report"	does not re	lieve the ope	erator o	of madimity	
chould their	operations	have failed to	adequatel	v investigate and r	emediat	e contaminat	ion that pose a th	reat to g	ground wate	er, surtace w	ater, hi	ıman neaitn	
or the enviro	onment. In	addition, NM	OCD acce	ptance of a C-141	report d	loes not relie	ve the operator of	f respons	sibility for	compliance	with an	y other	
federal, state	e, or local la	iws and/or reg	ulations.		OIL CONSERVATION DIVISION								
						OIL COMPLETATION DIVIDION							
Signature:													
Printed Name: Chris Jones						Approved by Environmental Specialist							
Finited (value, Chi is dones							04/_/						
Title: HES	Specialist					Approval Da	ate: 04/~/~		Expiration	n Date:	///		
E-mail Address: Christopher.Jones@oxy.com						Conditions of Approval:				Attached			
Date: 3/18/2015 Phone: 575-628-4121							///		1RP-3539				

^{*} Attach Additional Sheets If Necessary