microment. Nor des approval relieve the operation of its responsibility to comply with any other applicable gavernmental authority's rules, regulations or orditances.         Operator:       ApaChe Corporation       OGRID #: 873         Address:       303 Veterans Airpark Lane, Suite 3000, Midland, TX 79705         Feality or well mame:       ApaChe State SMD 3         API Number:       30-015-38978       OCD Permit Number:       212199         UL or OrrOr.       E. Section       30. Township       17. S. Range       31. E. County:       Eddy         Center of Proposed Design:       Laitude       32.806272° N       Longitude       103.913963° W       NAD:       XDI: XDI: XDI: XDI: XDI: XDI: XDI: XDI:	District III       State of New Mexico         District III       Energy Minerals and Natural Resources         District III       Department         District III       Oil Conservation Division         1000 Rio Brazos Road, Aztec, NM 87410       04 2012         District IV       Santa Fe, NM 95505
(Inditioning the construction of the section of the sectin sectin section of the section of the section of the	Closer Webp System Permit or Closure Plan Application
Interactions: Please submit one application (Prom C14/LCE) per individual closely/or spinal steel to the prove in implication and steel steel in a provide in the prove in implication of states were required when the Prom C144. Steekee backee that approve in the individue accords and the Prove in an application of states were ground steel to the provide and proves in implication of states were ground where and the proves in implication result is pollution of states were ground where one the volumement. Ner des approval netices the operator of its responsibility to comply with any other application of states were ground where ner the volumement. Ner des approval netices the provide a periods of the provides approval netices and on office sets.         Operation:       Apache Corporation       OCRID #: 873         Address:       303 Veterans Airpark Lane, Suite 3000, Midland, TX 79705         Facility or well name:       Apache State SWD 3         API Number:       30       Township         17       States       312 County:       Eddy         Catter of Proposed Design:       Latitude 32.e806272' N       Longitude 103.913963' W       NAD: [01927]       1983         Surface Owner:       Federal State       Private       Tribing Address which require grior approval of a permit or notice of inicitient)       P&A         Question:       State [Private]       Tribing (Applies to activities which require grior approval of a permit or notice of inicitient)       P&A         Question:       State [Private]       Tribing (Applies to activities which require requirements	(that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure)
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lease be solved that approval of this request on or files they expension of the table of the partial of the pa	
Operator:       Apache Corporation       OGRD #: 873         Address:       303 Veterans Airpark Lane, Suite 3000, Midland, TX 79705         Feiling or will mome:       Apache State SWD 3         API Number:       30-015-38978       OCD Permit Number:       212799         U.I. or QWQT:       E       Section       30       Township       17 S. Range       31 E. County:       Eddy         Center of Proposed Design:       Latitude       32.806272* N       Longitude       103.913963* W       NAD:       [21927]       1983         Surface Owner:       Federal [S] State       Private       Thial Trast or Indian Allotment       Image: Subsection of 19.15.17.11 NMAC       PRECEIVED       AFR       122.2012       Image: Subsection C of 19.15.17.11 NMAC       Image: Subsection C of 19.15.17.13 NMAC       Image	Please be advised that approval of this request does not relieve the operator of liability should operations result in pollution of surface water, ground water or the environment. Nor does approval relieve the operator of its responsibility to comply with any other applicable governmental authority's rules, regulations or ordinances.
Address:       303       Veterans Airpark Lane, Suite 3000, Midland, TX 79705         Facility or well name:       Apache State SWD 3         API Number:       30-015-38978         OLD OPErmit Number:       21279         U. or Otic/QIr       E       Section       30       Township       17       S       Range       31       E       County:       Eddy         Center of Proposed Design:       Laniude       32.806272*       N       Longitude       103.913963*       NAD:       [2]1927<]	Operator: Apache Corporation OGRID#: 873
API Number:       30-015-38978       OCD Permit Number:       212199         UL or QHPQtr       E       Section       30       Township       17       S Range       31       E       County:       Eddy         Center of Proposed Design:       Latitude       32.806272*       N       Longitude       103.913963*       W       NAD:       [2]927       1983         Surface Owner:       Federal (I) State       Private       Trial Trust or Indian Allotment       Image: Subsection H of 19.15.17.11       NMAC         Operation:       Ortiling a new well (I) Workower or Drilling (Applies to activities which require prior approval of a permit or notice of intent)       P&A         Signes:       Subsection C of 19.15.17.11       NMAC         I 21*x 24*, 2*       Texterions:       Federal (I) Monte or Drilling (I) Applies (I) Activities which require prior approval of a permit or notice of intent)       P&A         Monte Charles (I) I 10.17.11       NMAC       Image: Number:       Applie 12 2012         Signes:       Subsection C of 19.15.17.11       NMAC       Image: Number:       Applies 10.8 NMAC         I 21*x 24*, 2*       Texterions:       Ecosing (I) Appliestion Attechment Checklist:       Subsection B of 19.15.17.19 NMAC       Image: Number:       Image: Number:       Image: Number:       Image: Number:       Image: Number: </td <td></td>	
Ufl. or QirQir       E       Section       30       Township       17       S Range       31       E       County:       Eddy         Center of Proposed Design:       Latitude       32.806272'       N       Longitude       103.913963'       W       NAD:       Dig127       1983         Surface Owner:       Federal X       State       Private       Tribal Trast or Indian Allotment         E       Closed-Joop System:       Subsection H of 19.15.17.11 NMAC       PRAC       PRECEIVEU       APR 12 2012       APR 12 2012         Signs:       Subsection C of 19.15.17.11 NMAC       PRECEIVEU       APR 12 2012       APR 12 2012       APR 12 2012         Signed in compliance with 19.15.16.8 NMAC       NMOCD ARTES:A       NMOCD ARTES:A       NMOCD ARTES:A         Closed-loop Systems Permit Application Attachment Checklist:       Subsection B of 19.15.17.11 NMAC       NMOCD ARTES:A         Closed-loop Systems Plan - based upon the appropriate requirements of 19.15.17.11 NMAC       NMOCD ARTES:A       NMOCD         Closed-loop Systems Plan - based upon the appropriate requirements of 19.15.17.12 NMAC       Subsection C of 19.15.17.3 NMAC and 19.15.17.13 NMAC         Previously Approved Design (attach copy of design)       API Number:	
Ufl. or QirQir       E       Section       30       Township       17       S Range       31       E       County:       Eddy         Center of Proposed Design:       Latitude       32.806272'       N       Longitude       103.913963''       NAD:       NAD:       [21927]       1983         Surface Owner:       Federal [3] State       Private       Tribal Trust or Indian Allotment       NAD:       [21927]       1983         Surface Owner:       Foderal [3] State       Private       Trust or Indian Allotment       Previous       [21927]       1983         Surface Owner:       Foderal [3] State       Private       Trust or Indian Allotment       Previous       [21927]       1983         Surface Owner:       Foderal [3] State       Private       [31] E       County:       Eddy         Stora:       Subsection C of 19.15.17.11 NMAC       Previous       APR 12 2012       APR 12 2012       APR 12 2012         [35] Signed in compliance with 19.15.16.8 NMAC       Intructions: Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the documents are attached.       INMOCD ATTES:A         [36] Design Plan - based upon the appropriate requirements of 19.15.17.11 NMAC       Intructions: Fach of the following items must be attached to the applicatite requirements of 19.15.17.2 NMAC	API Number:         30-015-38978         OCD Permit Number:         212799
Surface Owner:       Federal X State       Private       Tribal Trust or Indian Allotment         Image: Closed-loop System:       Subsection H of 19.15.17.11 NMAC       P&A         Operation:       Drilling a new well X Workover or Drilling (Applies to activities which require prior approval of a permit or notice of intent)       P&A         X Above Ground Steel Tanks or X Haul-off Bins       Image: Closed-loop Systems Permit Application Attachment Checklist:       Subsection B of 19.15.17.9 NMAC       Image: Closed-loop Systems Permit Application Attachment Checklist:       Subsection B of 19.15.17.9 NMAC         Closed-loop Systems Permit Application Attachment Checklist:       Subsection B of 19.15.17.9 NMAC       ImmOCD ATTERNAL         Closed Plan - based upon the appropriate requirements of 19.15.17.1 NMAC       ImmOCD ATTERNAL       ImmOCD ATTERNAL         Design Plan - based upon the appropriate requirements of 19.15.17.1 NMAC       ImmOCD ATTERNAL       ImmOCD ATTERNAL         Design Plan - based upon the appropriate requirements of 19.15.17.13 NMAC       ImmOCD ATTERNAL       Immocr         Design Plan - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC       Immocr       Immocr         Design Plan (Plasa complete Box 5) - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC       Immocr       Immocr         Mast Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only: (19.15.17.13	U/L or Qtr/Qtr E Section 30 Township 17 S Range 31 E County: Eddy
Image: Subsection H of 19.15.17.11 NMAC         Operation:       Original providing a new well image: Subsection H of 19.15.17.11 NMAC         Step:       Subsection C of 19.15.17.11 NMAC         Image: Subsection C of 19.15.17.11 NMAC       Image: Subsection C of 19.15.17.11 NMAC         Image: Subsection C of 19.15.17.11 NMAC       Image: Subsection C of 19.15.17.11 NMAC         Image: Subsection C of 19.15.17.11 NMAC       Image: Subsection B of 19.15.17.19 NMAC         Image: Subsection C of 19.15.17.11 NMAC       Image: Subsection B of 19.15.17.19 NMAC         Image: Subsection C of 19.15.17.11 NMAC       Image: Subsection B of 19.15.17.19 NMAC         Image: Subsection C of 19.15.17.11 NMAC       Image: Subsection B of 19.15.17.19 NMAC         Image: Subsection C of 19.15.17.11 NMAC       Image: Subsection B of 19.15.17.12 NMAC         Image: Subsection C of 19.15.17.11 NMAC       Image: Subsection C of 19.15.17.13 NMAC         Image: Subsection C of 19.15.17.11 NMAC       Image: Subsection C of 19.15.17.13 NMAC         Image: Subsection C of 19.15.17.13 NMAC       Image: Subsection C of 19.15.17.13 NMAC         Image: Subsection C of 19.15.17.11 NMAC       Image: Subsection C of 19.15.17.13 NMAC         Image: Subsection C of 19.15.17.13 NMAC       Image: Subsection C of 19.15.17.13 NMAC         Image: Subsection C of 19.15.17.13 NMAC       Image: Subsection C of 19.15.17.13 NMAC         Imare distribution: Subsection S of Subsection	Center of Proposed Design: Latitude <u>32.806272° N</u> Longitude <u>103.913963° W</u> NAD: 🕅 1983
Operation:       Drilling a new well Workover or Drilling (Applies to activities which require prior approval of a permit or notice of intent)       P&A         Above Ground Steel Tanks or Mau-off Bins       Image: Subsection C of 19.15.17.11.NMAC         [] 2"x 24", 2" tettering, providing Operator's name, site location, and emergency telephone numbers       Image: Subsection C of 19.15.17.11.NMAC       Image: Subsection C of 19.15.17.11.NMAC         [] Cheed-loop Systems Permit Application Attachment Checklist:       Subsection B of 19.15.17.9 NMAC       Image: Subsection C of 19.15.17.11.NMAC         [] Cheed-loop Systems Permit Application Attachment Checklist:       Subsection C of 19.15.17.13 NMAC       Image: Subsection C of 19.15.17.13 NMAC         [] Strattions:       Each of the following items must be attached: to the appropriate requirements of 19.15.17.12 NMAC       Image: Subsection C of 19.15.17.13 NMAC         [] Operating and Maintenance Plan absed upon the appropriate requirements of 19.15.17.12 NMAC       Image: Subsection C of 19.15.17.13 NMAC         [] Previously Approved Design (attach copy of design)       API Number:       Image: Subsection C of 19.15.17.13 NMAC         [] Previously Approved Destade attack and the disposal of liquids, drilling fluids and drill cuttings. Use attachment if more than two fuellities are required.       Disposal Facility Name: Sundance Services, Inc.       Disposal Facility Name: Sundance Services, Inc.       D	Surface Owner: 🛄 Federal 🞇 State 🛄 Private 🛄 Tribal Trust or Indian Allotment
Closed-loop Systems Permit Application Attachment Checklist:       Subsection B of 19.15.17.9 NMAC         instructions:       Each of the following items must be attachment Checklist:       Subsection Plan - based upon the appropriate requirements of 19.15.17.11 NMAC         Image: Design Plan - based upon the appropriate requirements of 19.15.17.12 NMAC       Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC         Image: Design Plan - based upon the appropriate requirements of 19.15.17.12 NMAC       Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC         Image: Devisors Plan (Please complete Box 5) - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC         Image: Devisors Plan (Please complete Box 5) - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC         Image: Devisors Planse indentify the facility or facilities for the disposal of liquids, drilling fluids and drill cuttings. Use attachment if more than two facilities are required.         Disposal Facility Name: Controlled Recovery, Inc.       Disposal Facility Permit Number: <u>NM-01-0006</u> Disposal Facility Name: Sundance Services, Inc.       Disposal Facility Permit Number: <u>NM-01-0003</u> Will any of the proposed closed-loop system operations and associated activities occur on or in areas that will not be used for future service and operations?         Soil Backfill and Cover Design Specifications based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC         Soil Backfill and Cover Design Specifications based upon the appropriate require	Operation:       Drilling a new well X Workover or Drilling (Applies to activities which require prior approval of a permit or notice of intent)       P&A         Above Ground Steel Tanks or       Haul-off Bins         Image: Subsection C of 19.15.17.11.NMAC       Image: Subsection C of 19.15.17.11.NMAC         Image: Image: Subsection C of 19.15.17.11.NMAC       Image: Subsection C of 19.15.17.11.NMAC         Image: Image: Subsection C of 19.15.17.11.NMAC       Image: Subsection C of 19.15.17.11.NMAC
Instructions: Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the documents are attached.         Image: State of the properties of the appropriate requirements of 19.15.17.11 NMAC         Image: State of the appropriate requirements of 19.15.17.12 NMAC         Image: State of the appropriate requirements of 19.15.17.12 NMAC         Image: State of the appropriate requirements of 19.15.17.12 NMAC         Image: State of the appropriate requirements of 19.15.17.12 NMAC         Image: State of the appropriate requirements of 19.15.17.12 NMAC         Image: State of the appropriate requirements of 19.15.17.12 NMAC         Image: State of the appropriate requirements of 19.15.17.12 NMAC         Image: State of the appropriate requirements of 19.15.17.12 NMAC         Image: State of the appropriate requirements of 19.15.17.12 NMAC         Image: State of the appropriate requirements of 19.15.17.12 NMAC         Image: State of the appropriate requirements of 19.15.17.13 NMAC         Image: State of the appropriate requirements of 19.15.17.13 NMAC         Image: State of the appropriate requirements of 19.15.17.13 NMAC         Image: State of the appropriate requirements of Sta	MMOCD ARTESIA
Instructions: Please indentify the facility or facilities for the disposal of liquids, drilling fluids and drill cuttings. Use attachment if more than two facilities are required.         Disposal Facility Name: Controlled Recovery, Inc.       Disposal Facility Permit Number: NM-01-0006         Disposal Facility Name: Sundance Services, Inc.       Disposal Facility Permit Number: NM-01-0003         Will any of the proposed closed-loop system operations and associated activities occur on or in areas that will not be used for future service and operations?            Yes (If yes, please provide the information below) No         Required for impacted areas which will not be used for future service and operations:            Soil Backfill and Cover Design Specifications - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC            Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC            Application Certification:             I hereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief.            Name (Print): Brian Wood             Brian@permitswest.com             Date: 2-20-12             Date: 2-20-12	Instructions: Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the documents are attached.         Image: Design Plan - based upon the appropriate requirements of 19.15.17.11 NMAC         Image: Design Plan - based upon the appropriate requirements of 19.15.17.11 NMAC         Image: Design Plan - based upon the appropriate requirements of 19.15.17.12 NMAC         Image: Design Plan - based upon the appropriate requirements of 19.15.17.12 NMAC         Image: Design Plan - based upon the appropriate requirements of 19.15.17.12 NMAC         Image: Design Plan - based upon the appropriate requirements of 19.15.17.12 NMAC         Image: Design Plan - based upon the appropriate requirements of 19.15.17.12 NMAC         Image: Design Plan - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC         Image: Design Plan - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC         Image: Design Plan - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC         Image: Design Plan - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC         Image: Design Plan - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC         Image: Design Plan - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC
Instructions: Please indentify the facility or facilities for the disposal of liquids, drilling fluids and drill cuttings. Use attachment if more than two facilities are required.         Disposal Facility Name: Controlled Recovery, Inc.       Disposal Facility Permit Number: NM-01-0006         Disposal Facility Name: Sundance Services, Inc.       Disposal Facility Permit Number: NM-01-0003         Will any of the proposed closed-loop system operations and associated activities occur on or in areas that will not be used for future service and operations?	5. Waste Removal Closure For Closed-Ioon Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only: (19151713 DNMAC)
Disposal Facility Name: Controlled Recovery, Inc.       Disposal Facility Permit Number: NM-01-0006         Disposal Facility Name: Sundance Services, Inc.       Disposal Facility Permit Number: NM-01-0003         Will any of the proposed closed-loop system operations and associated activities occur on or in areas that will not be used for future service and operations?       NM-01-0003         Will any of the proposed closed-loop system operations and associated activities occur on or in areas that will not be used for future service and operations?       Service and operations:         Soil Backfill and Cover Design Specifications - based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC       Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC         Operator Application Certification:       I hereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief.         Name (Print):       Brian Wood       Title:       Consultant         Signature:       Date:       2-20-12         e-mail address:       brian@permitswest.com       Telephone:       505 466 8120	Instructions: Please indentify the facility or facilities for the disposal of liquids, drilling fluids and drill cuttings. Use attachment if more than two
Disposal Facility Name:       Sundance Services, Inc.       Disposal Facility Permit Number:       NM-01-0003         Will any of the proposed closed-loop system operations and associated activities occur on or in areas that will not be used for future service and operations?       Disposal Facility Permit Number:       NM-01-0003         Will any of the proposed closed-loop system operations and associated activities occur on or in areas that will not be used for future service and operations?       Soil Backfill and Cover Design Specifications - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC         Becvegetation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC       Soil Backfill and Cover Design Specifications - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC         Operator Application Certification:       Interest cequirements of Subsection G of 19.15.17.13 NMAC         Interest certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief.         Name (Print):       Brian Wood         Signature:       Date:       2-20-12         c-mail address:       brian@permitswest.com       Telephone:       505 466 8120	
Will any of the proposed closed-loop system operations and associated activities occur on or in areas that will not be used for future service and operations?         Yes (If yes, please provide the information below) X No         Required for impacted areas which will not be used for future service and operations:         Soil Backfill and Cover Design Specifications - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC         Re-vegetation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC         Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC         Goperator Application Certification:         I hereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief.         Name (Print):       Brian Wood         Title:       Consultant         Date:       2-20-12         e-mail address:       brian@permitswest.com	
Soil Backfill and Cover Design Specifications based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC         Re-vegetation Plan - based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC         Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC         Image: Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC         Image: Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC         Image: Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC         Image: Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC         Image: Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC         Image: Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC         Image: Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC         Image: Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC         Image: Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC         Image: Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC         Image: Site Reclamation Plan - based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC         Image: Site Reclamation Plan - based up	Will any of the proposed closed-loop system operations and associated activities occur on or in areas that will not be used for future service and operations?
Operator Application Certification:         I hereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief.         Name (Print):       Brian Wood         Signature:       Date:         c-mail address:       brian@permitswest.com	Soil Backfill and Cover Design Specifications based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC Re-vegetation Plan - based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC
I hereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief.         Name (Print):       Brian Wood         Signature:	
Signature:	
Signature:         Date:         2-20-12           c-mail address:         brian@permitswest.com         Telephone:         505 466 8120	
c-mail address: brian@permitswest.com Telephone: 505 466 8120	
form (-144 f) f (2 - 1) = 0 = 0 = 0 = 0 = 0	c-mail address:     D11111102001111103we3000001     Tclephone:     505     466     8120       Form C-144 CLEZ     Oil Conservation Division     Page 1 of 2

7. OCD Approval: Remit Application (including closure plan) Closure Plan (on)y)
OCD Representative Signature.
Title: DIST HOLPEWSD OCD Permit Number: 212799
8. <u>Closure Report (required within 60 days of closure completion)</u> : Subsection K of 19.15.17.13 NMAC Instructions: Operators are required to obtain an approved closure plan prior to implementing any closure activities and submitting the closure report. The closure report is required to be submitted to the division within 60 days of the completion of the closure activities. Please do not complete this section of the form until an approved closure plan has been obtained and the closure activities have been completed. Closure Completion Date: <u>S-1-12</u>
9       Closure Report Regarding Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only:         Instructions: Please indentify the facility or facilities for where the liquids, drilling fluids and drill cuttings were disposed. Use attachment if more than two facilities were utilized.         Disposal Facility Name:       Disposal Facility Name:         Disposal Facility Name:       Disposal Facility Permit Number:
Were the closed-loop system operations and associated activities performed on or in areas that <i>will not</i> be used for future service and operations? [] Yes (If yes, please demonstrate compliance to the items below) X No
Required for impacted areas which will not be used for future service and operations          Site Reclamation (Photo Documentation)         Soil Backfilling and Cover Installation         Re-vegetation Application Rates and Seeding Technique
10. Operator Closure Certification:
I hereby certify that the information and attachments submitted with this closure report is true, accurate and complete to the best of my knowledge and belief. I also certify that the closure complies with all applicable closure requirements and conditions specified in the approved closure plan.
Name (Print): Vicki Brown Title: Arly Juch
Signature: Niche Brown Date: 8-28-12
e-mail address VICKI. brown Capachecorp. Com Telephone: 432.818.1000