

District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Avenue, 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

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

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DEC 2 2005

Form C-144  
June 1, 2004

OCD-ARTESIA

For drilling and production facilities, submit  
to appropriate NMOCD District Office.  
For downstream facilities, submit to Santa Fe  
office

**Pit or Below-Grade Tank Registration or Closure**

Is pit or below-grade tank covered by a "general plan"? Yes ☒ No ☐

Type of action: Registration of a pit or below-grade tank ☐ Closure of a pit or below-grade tank ☒

Operator: <u>Yates Petroleum Corporation</u> Telephone: <u>505-748-4500</u> e-mail address: <u>mikes@ypcnm.com</u>		
Address: <u>105 South 4<sup>th</sup> Street, Artesia, N.M. 88210</u>		
Facility or well name: <u>Jackson AT 9</u> API #: <u>30-015-22799</u> U/L or Qtr/Qtr <u>M</u> Sec <u>13</u> T <u>17S</u> R <u>25E</u>		
County: <u>Eddy</u> Latitude <u>32.82986</u> Longitude <u>104.44452</u> NAD: 1927 <input checked="" type="checkbox"/> 1983 <input type="checkbox"/>		
Surface Owner: Federal <input type="checkbox"/> State <input type="checkbox"/> Private <input checked="" type="checkbox"/> Indian <input type="checkbox"/>		
<b>Pit</b> Type: Drilling <input type="checkbox"/> Production <input type="checkbox"/> Disposal <input type="checkbox"/> Work over <input checked="" type="checkbox"/> Emergency <input type="checkbox"/> Lined <input checked="" type="checkbox"/> Unlined <input type="checkbox"/> Liner type: Synthetic <input checked="" type="checkbox"/> Thickness <u>12</u> mil Clay <input type="checkbox"/> Pit Volume _____ bbl	<b>Below-grade tank</b> Volume: _____ bbl Type of fluid: _____ Construction material: _____ Double-walled, with leak detection? Yes <input type="checkbox"/> If not, explain why not. _____	
Depth to ground water (vertical distance from bottom of pit to seasonal high water elevation of ground water.)	Less than 50 feet 50 feet or more, but less than 100 feet 100 feet or more	(20 points) (10 points) ( 0 points) XXXX
Wellhead protection area: (Less than 200 feet from a private domestic water source, or less than 1000 feet from all other water sources.)	Yes No	(20 points) ( 0 points) XXXX
Distance to surface water: (horizontal distance to all wetlands, playas, irrigation canals, ditches, and perennial and ephemeral watercourses.)	Less than 200 feet 200 feet or more, but less than 1000 feet 1000 feet or more	(20 points) (10 points) XXXX ( 0 points)
<b>Ranking Score (Total Points)</b>		<b>10 Points</b>

**If this is a pit closure:** (1) Attach a diagram of the facility showing the pit's relationship to other equipment and tanks. (2) Indicate disposal location: (check the onsite box if you are burying in place) on-site ☒ off-site ☐ If off-site, name of facility: \_\_\_\_\_. (3) Attach a general description of remedial action taken including remediation start date and end date. (4) Groundwater encountered: No ☐ Yes ☐ If yes, show depth below ground surface \_\_\_\_\_ ft. and attach sample results. (5) Attach soil sample results and a diagram of sample locations and excavations.

Additional Comments: Work plan for the Closure of Work-over Pit. A 20 mil liner will be placed 3' below grade with a minimum of 3' over-lap of the underlying pit.  
Backfill encapsulated wastes with a minimum of 3' of clean soil or like material capable of supporting native plant growth.  
A one-call and 48 hour notice will be provided to OCD prior to pit closure actions.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that the above-described 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 ☐.

Date: 11/21/05

Printed Name/Title Mike Stubblefield / Regulatory Agent

Signature Mike Stubblefield

Your certification and NMOCD approval of this application/closure does not relieve the operator of liability should the contents of the pit or tank contaminate ground water or otherwise endanger public health or the environment. Nor does it relieve the operator of its responsibility for compliance with any other federal, state, or local laws and/or regulations.

Approval:

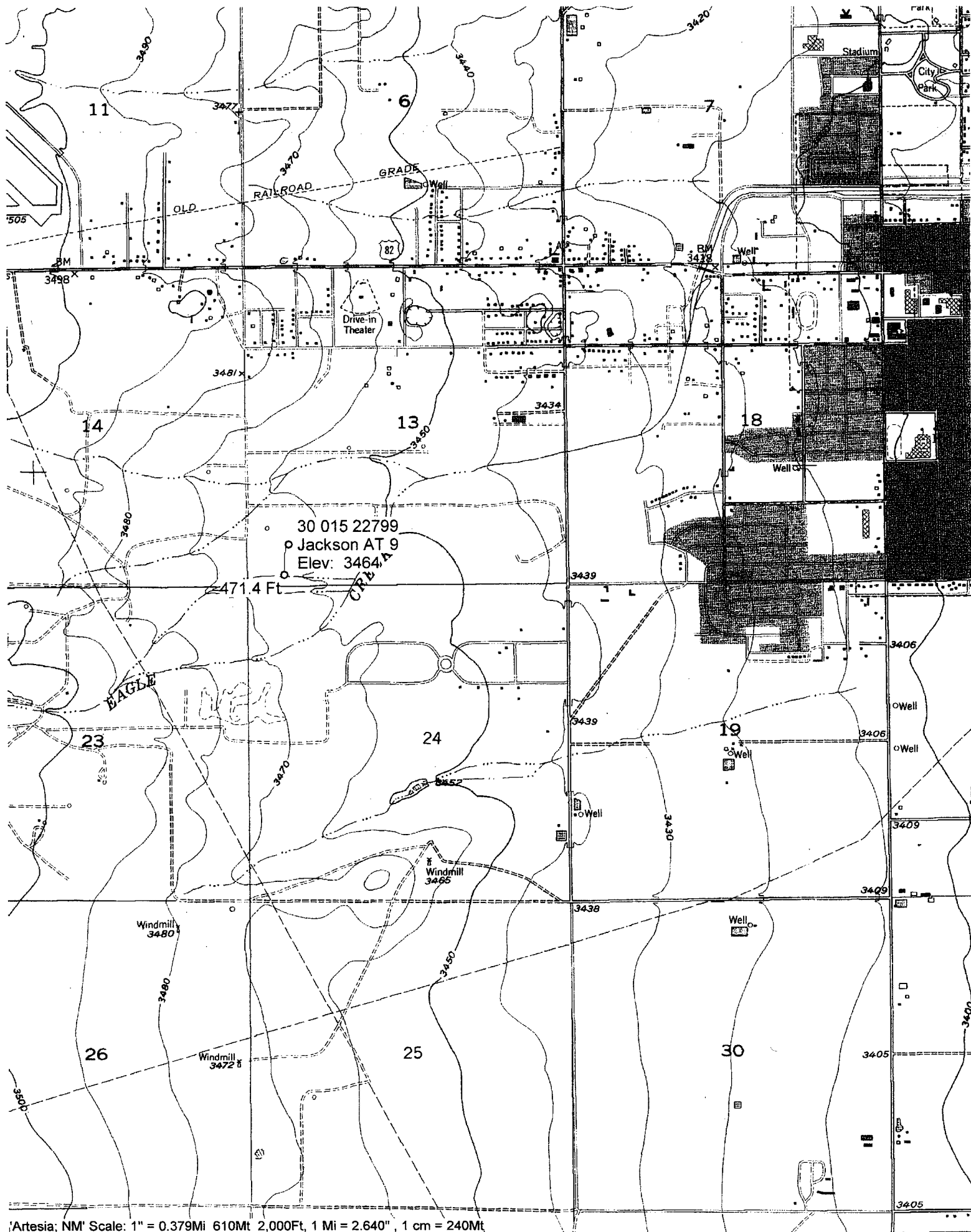
Printed Name/Title \_\_\_\_\_

Gerry Guye  
Compliance Officer

Signature Gerry Guye

Date: \_\_\_\_\_

DEC 6 2005



*New Mexico Office of the State Engineer*  
**Well Reports and Downloads**

*Jackson AT 9*

Township:  Range:  Sections:

NAD27 X:  Y:  Zone:  Search Radius:

County:  Basin:  Number:  Suffix:

Owner Name: (First)  (Last)  ☐ Non-Domestic ☐ Domestic  
☒ All

Well / Surface Data Report

Avg Depth to Water Report

Water Column Report

Clear Form

WATERS Menu

Help

**AVERAGE DEPTH OF WATER REPORT 11/21/2005**

Bsn	Tws	Rng	Sec	Zone	X	Y	Wells	(Depth Water in Feet)		
								Min	Max	Avg
RA	17S	25E	01				36	106	227	171
RA	17S	25E	02				4	170	300	213
RA	17S	25E	03				1	210	210	210
RA	17S	25E	04				2	159	185	172
RA	17S	25E	06				1	30	30	30
RA	17S	25E	07				3	230	300	275
RA	17S	25E	08				5	87	220	186
RA	17S	25E	09				35	160	403	208
RA	17S	25E	11				31	80	227	174
RA	17S	25E	12				33	50	190	130
RA	17S	25E	13				25	70	180	110
RA	17S	25E	14				16	135	300	193
RA	17S	25E	15				9	140	220	188
RA	17S	25E	16				1	205	205	205
RA	17S	25E	17				1	100	100	100
RA	17S	25E	21				1	180	180	180
RA	17S	25E	22				1	200	200	200
RA	17S	25E	23				2	171	196	184
RA	17S	25E	25				1	150	150	150
RA	17S	25E	27				1	200	200	200
RA	17S	25E	35				1	185	185	185

Record Count: 210