## State of New Mexico Energy Minerals and Natural Resources

Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505 For drilling and production facilities, submit to appropriate NMOCD District Office For downstream facilities, submit to Santa Fe office

Form C-144

June 1, 2004

## Pit or Below-Grade Tank Registration or Closure

Is pit or below-grade tai  Type of action Registration of a pit	nk covered by a "general plan"? Yes or below-grade tank XX Closure of a pit or below	No [x] ⁄-grade tank ☐	N 27 200/
Operator <u>Fasken Oil and Ranch, Ltd.</u> Telepho	ne <u>432 687<sup>1</sup>-1777</u> e-mail address _		ARTESIA
Address 303 West Wall Balte 1000 11141	dia 17/01		
Facility or well name Maralo "35" Fed. No. 5 API # Z	N32 32 03.8 U/L or Qtr/Qtr Longitude W1	C Sec 35 T 04 15 15.0 NAD 1	20S R 2/E 927 □ 1983 □
Surface Owner Federal 💢 State 🗌 Private 🔲 Indian 🗍			
<u>Pit</u>	Below-grade tank		
Type Drilling AProduction Disposal D	Volumebbl Type of fluid  Construction material		
Workover ☐ Emergency ☐			
Lined 🔀 Unlined 🗌	Double-walled, with leak detection? Yes   If not, explain why not		
Liner type Synthetic X Thickness 12 mil Clay □			
Prt Volumebbl 24,000			
Depth to ground water (vertical distance from bottom of pit to seasonal high water elevation of ground water )	Less than 50 feet	(20 points)	
	50 feet or more, but less than 100 feet	(10 points)	
	100 feet or more	( 0 points)	0
	Yes	(20 points)	
Wellhead protection area (Less than 200 feet from a private domestic	No	( 0 points)	
water source, or less than 1000 feet from all other water sources)	140	( o points)	0
Distance to surface water (horizontal distance to all wetlands, playas, irrigation canals, ditches, and perennial and ephemeral watercourses)	Less than 200 feet	(20 points)	
	200 feet or more, but less than 1000 feet	(10 points)	
	1000 feet or more	( 0 points)	0
	Ranking Score (Total Points)		0
If this is a pit closure: (1) Attach a diagram of the facility showing the pit	's relationship to other equipment and tanks (2) I	ndicate disposal location (ch	eck the onsite box if
your are burying in place) onsite 🗌 offsite 🔲 If offsite, name of facility_	(3) Attach a gene	eral description of remedial ac	tion taken including
remediation start date and end date (4) Groundwater encountered No	Yes \( \square\) If yes, show depth below ground surface_	ft and attach s	sample results
(5) Attach soil sample results and a diagram of sample locations and excava-	ations		
	ater provided by Mike Brat	cher with the N	MOCD Artesia
office.			
I hereby certify that the information above is true and complete to the bes has been/will be constructed or closed according to NMOCD guidelin			
Date6/25/07	L:	•	
Printed Name/Title Jimmy D. Carlile/Reg Affair	s Signature through	aller	
Your certification and NMOCD approval of this application/closure does otherwise endanger public health or the environment. Nor does it relieve regulations	not relieve the operator of liability should the cont		
Approval	Signed By Mile A	·/	地上海外的
Printed Name/Title	Signed By Mily	DEMOULES DOLO	

AS A CONDITION OF APPROVAL, A DETAILED CLOSURE PLAN MUST BE APPROVED BEFORE CLOSURE MAY COMMENCE.

