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

a_mail address.

kemm@namice com

State of New Mexico **Energy Minerals and Natural Resources** Department

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

JAN 29 7009

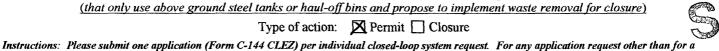
Form C-144 CLEZ July 21, 2008

For closed-loop systems that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure, submit to the appropriate NMOCD District Office.

Closed-Loop System Permit or Closure Plan Application

(that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure)

Type of action: Permit Closure



closed-loop system that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure, please submit a Form C-144. Diagra ha advised that approved of this request does not relieve the operator of liability should executions regult in pollution of surface ground water or the

environment. Nor does approval relieve the operator of its responsibility to comply with any other	r applicable governmental authority's rules, regulations or ordinances.					
Operator:Nadel and Gussman Permian LLC	OGRID #: 155615					
Address:601 North Marienfeld, Suite 508, Midland Tx 701						
Facility or well name: _Bond Fee #2						
API Number:30-15-34861OCD Permit Nur						
U/L or Qtr/QtrC Section20 Township21 S Range						
Center of Proposed Design: Latitude Longitude	NAD: □1927 □ 1983					
Surface Owner: ☐ Federal ☐ State ☒ Private ☐ Tribal Trust or Indian Allotment						
2. ☐ Closed-loop System: Subsection H of 19.15.17.11 NMAC Operation: ☐ Drilling a new well ☒ Workover or Drilling (Applies to activities which re ☒ Above Ground Steel Tanks or ☐ Haul-off Bins	equire prior approval of a permit or notice of intent) P&A					
 Signs: Subsection C of 19.15.17.11 NMAC ☐ 12"x 24", 2" lettering, providing Operator's name, site location, and emergency telepho ☑ Signed in compliance with 19.15.3.103 NMAC 	one numbers					
Closed-loop Systems Permit Application Attachment Checklist: Subsection B of 19.15.17.9 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. □ Design Plan - based upon the appropriate requirements of 19.15.17.11 NMAC □ Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC □ Closure 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 □ Previously Approved Design (attach copy of design) API Number: □ Previously Approved Operating and Maintenance Plan API Number:						
Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel To Instructions: Please indentify the facility or facilities for the disposal of liquids, drilling facilities are required. Disposal Facility Name: List Attached Disposal Facility Name: Disposal Facility	fluids and drill cuttings. Use attachment if more than two al Facility Permit Number:					
Disposal Facility Name: Disposal Facility Permit Number: Will any of the proposed closed-loop system operations and associated activities occur on or in areas that <i>will not</i> 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 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						
6. Operator Application Certification:						
I hereby certify that the information submitted with this application is true, accurate and contains the containing and the submitted with this application is true, accurate and contains the containing and the containing accurate and containing accurate accura	omplete to the best of my knowledge and belief.					
Name (Print):Kem E. McCready Title:NM Operations Manager						
Signature: Yon E. McGlady Date: 1/27/09						

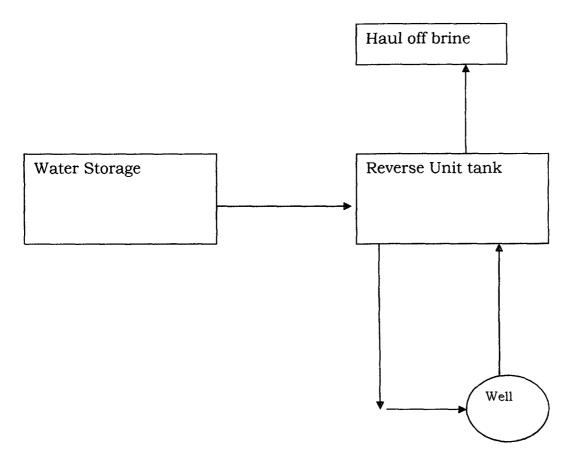
Telephone.

137_687_1170

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7. OCD Approval: Permit Application (including closure plan) Closure Plan (only)					
OCD Representative Signature:	Approval Date: 02-01-09				
Title: DISTRICT II SUPERVISOR	a .				
8. Closure Report (required within 60 days of closure completion): 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:				
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.					
Closure Report Regarding Waste Removal Closure For Closed-loop System Instructions: Please indentify the facility or facilities for where the liquids, dr two facilities were utilized.	s That Utilize Above Ground Steel Tanks or Haul-off Bins Only: illing fluids and drill cuttings were disposed. Use attachment if more than				
Instructions: Please indentify the facility or facilities for where the liquids, dr	illing fluids and drill cuttings were disposed. Use attachment if more than				
Instructions: Please indentify the facility or facilities for where the liquids, dr two facilities were utilized. Disposal Facility Name: Disposal Facility Name:	Disposal Facility Permit Number: Disposal Facility Permit Number:				
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Instructions: Please indentify the facility or facilities for where the liquids, dr two facilities were utilized. Disposal Facility Name: Disposal Facility Name: Were the closed-loop system operations and associated activities performed on o	Disposal Facility Permit Number: Disposal Facility Permit Number: Disposal Facility Permit Number: or in areas that will not be used for future service and operations?				
Instructions: Please indentify the facility or facilities for where the liquids, dr two facilities were utilized. Disposal Facility Name: Disposal Facility Name: Were the closed-loop system operations and associated activities performed on a Yes (If yes, please demonstrate compliance to the items below) No Required for impacted areas which will not be used for future service and operat Site Reclamation (Photo Documentation) Soil Backfilling and Cover Installation	Disposal Facility Permit Number: Disposal Facility Permit Number: Disposal Facility Permit Number: or in areas that will not be used for future service and operations?				
Instructions: Please indentify the facility or facilities for where the liquids, dr two facilities were utilized. Disposal Facility Name: Disposal Facility Name: Were the closed-loop system operations and associated activities performed on a Yes (If yes, please demonstrate compliance to the items below) \(\Boxed{\text{No}}\) No Required for impacted areas which will not be used for future service and operation Soit Reclamation (Photo Documentation) Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique	Disposal Facility Permit Number: Disposal Facility Permit Number: Disposal Facility Permit Number: or in areas that will not be used for future service and operations? attions: report is true, accurate and complete to the best of my knowledge and				
Instructions: Please indentify the facility or facilities for where the liquids, dr two facilities were utilized. Disposal Facility Name: Disposal Facility Name: Were the closed-loop system operations and associated activities performed on a Yes (If yes, please demonstrate compliance to the items below) No Required for impacted areas which will not be used for future service and opera Site Reclamation (Photo Documentation) Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique	Disposal Facility Permit Number: Disposal Facility Permit Number: Disposal Facility Permit Number: or in areas that will not be used for future service and operations? attions: ereport is true, accurate and complete to the best of my knowledge and ements and conditions specified in the approved closure plan.				
Instructions: Please indentify the facility or facilities for where the liquids, dr two facilities were utilized. Disposal Facility Name: Disposal Facility Name: Were the closed-loop system operations and associated activities performed on a Yes (If yes, please demonstrate compliance to the items below) \(\Boxed{\text{No}}\) No Required for impacted areas which will not be used for future service and operated 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 belief. I also certify that the closure complies with all applicable closure requires	Disposal Facility Permit Number: Disposal Facility Permit Number: Disposal Facility Permit Number: or in areas that will not be used for future service and operations? attions: e report is true, accurate and complete to the best of my knowledge and ements and conditions specified in the approved closure plan. Title:				

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WORKOVER CLOSED LOOP SYSTEM



Operating and Maintenance Plan:

During workover operations, third party service companies will utilize equipment to remove wellbore fluids, collect it and haul off for disposal.

Closure Plan:

No solids are expected to by produced all liquids will be hauled off to a permitted disposal facility\ well.

Permit No.	Company Name	Effective .	County.	Facility Name	Legals Legals
19	GANDY MARLEY INC	10/06/1994	Chaves	GANDY MARLEY LANDFARM	-4-11 S-31 E
28	OLD LOCO OIL CO	07/02/1985	Eddy	OLD LOCO TREATING PLANT	-19-17 S-31 E
43	Loco Hills Landfarm LLC	11/08/2004	Eddy	Loco Hills Landfarm	m-32-16 S-30 E
4	LOCO HILLS WATER DISPOSAL	10/30/1981	Eddy	LOCO HILLS WATER DISPOSAL	M-16-17 S-30 E
36	OK HOT OIL SERVICE INC	08/16/2000	Eddy	OK HOT OIL SERVICES INC	O-14-17 S-28 E
24	CHAPARRAL SWD	01/31/1995	Lea	CHAPARRAL TREATING PLANT	B-17-23 S-37 E
35	LEA LAND INC	01/05/2000	Lea	LEA LAND LANDFILL	-32-20 S-32 E
12	C&C LANDFARM INC	11/16/1992	Lea	C&C LANDFARM	B-3-20 S-37 E
13	ENVIRONMENTAL PLUS INC	02/15/1993	Lea	ENVIRONMENTAL PLUS LANDFARM	-14-22 S-37 E
15	GOO YEA LANDFARM INC	11/16/1992	Lea	GOO YEA LANDFARM	-14-11 S-38 E
23	J&L LANDFARM INC	05/10/1998	Lea	J&L LANDFARM	-9-20 S-38 E
25	GANDY CORP	06/27/1973	Lea	Gandy Corp. Treating Plant	-11-10 S-35 E
26	JENEX OPERATING CO	09/21/1983	Lea	JENEX TREATING PLANT	D-14-20 S-38 E
30	ARTESIA AERATION LLC	06/29/1999	Lea	ARTESIA AERATION LANDFARM	-7-17 S-32 E
1	SOUTH MONUMENT SURFACE WASTE FACILITY LLC	10/04/1999	Lea	SOUTH MONUMENT LANDFARM	A-25-36 S-20 E
33	DOOM LANDFARM	04/03/2000	Lea	DOOM LANDFARM	g-5-25 S-37 E
34	DD LANDFARM INC	04/12/2000	Lea	DD LANDFARM	-31-21 S-38 E
21	RHINO OILFIELD DISPOSAL INC	11/17/1997	Lea	RHINO OILFIELD LANDFARM	-34-20 S-38 E
44	COMMERCIAL EXCHANGE, INC.	11/01/2004	Lea	Blackwater Oil Reclamation Facility	d-1-25 S-37 E
39	PITCHFORK LANDFARM LLC	10/30/2002	Lea	PITCHFORK LANDFARM	A-5-24 S-34 E
6	CONTROLLED RECOVERY INC	04/27/1990	Lea	CONTROLLED RECOVERY	-27-20 S-32 E
42	COMMERCIAL EXCHANGE, INC.	07/22/2004	Lea	Blackwater Landfarm	f-1-25 S-37 E
38	SAUNDERS LANDFARM LLC	10/28/2002	Lea	SAUNDERS LANDFARM	M-7-14 S-34 E
41	LAZY ACE LANDFARM LLC	03/09/2004	Lea	LAZY ACE LANDFARM	M-22-20 S-34 E
3	SUNDANCE SERVICES, INC.	08/30/1977	Lea	SUNDANCE PARABO	m-29-21 S-38 E
37	COMMERCIAL EXCHANGE, INC.	03/31/2003	Lea	COMMERCIAL SURFACE WM FACILITY	A-1-20 S-36 E
8	T-N-T ENVIRONMENTAL INC	01/19/1987	Rio Arriba	TNT EVAP POND/LANDFARM	-8-25 N-3 W
11	ENVIROTECH INC	07/07/1992	San Juan	ENVIROTECH LANDFARM #2	-6-26 N-10 W
9	KEY FOUR CORNERS INC	04/02/1991	San Juan	KEY EVAP POND and Landfarm	E-2-29 N-12 W
10	JFJ LANDFARM LLC	07/22/2002	San Juan	JFJ Land Farm Crouch Mesa (Formerly Tierra)	j-2-29 N-12 W
5	BASIN DISPOSAL INC	10/16/1987	San Juan	BASIN DISPOSAL EVAP. POND	F-3-29 N-11 W