

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

OCT 28 2008 MAR 04 2009

Form C-144
July 21, 2008

OCD-ARTESIA

For temporary pits, closed-loop systems, and below-grade tanks, submit to the appropriate NMOCD District Office.
For permanent pits and exceptions submit to the Santa Fe Environmental Bureau office and provide a copy to the appropriate NMOCD District Office.

Pit, Closed-Loop System, Below-Grade Tank, or
Proposed Alternative Method Permit or Closure Plan Application

Type of action: ☐ Permit of a pit, closed-loop system, below-grade tank, or proposed alternative method
☐ Closure of a pit, closed-loop system, below-grade tank, or proposed alternative method
☐ Modification to an existing permit
☒ Closure plan only submitted for an existing permitted or non-permitted pit, closed-loop system, below-grade tank, or proposed alternative method

Instructions: Please submit one application (Form C-144) per individual pit, closed-loop system, below-grade tank or alternative request

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.

1. Operator: Burnett Oil Co. Inc OGRID #: 3080
Address: 801 Cherry St. Suite 1500 Ft. Worth Tx 76102
Facility or well name: Jackson B #37
API Number: 30-015-28641 OCD Permit Number: _____
U/L or Qtr/Qtr I Section 24 Township 17 Range 30 County: Edley
Center of Proposed Design. Latitude _____ Longitude _____ NAD: ☐ 1927 ☐ 1983
Surface Owner: ☒ Federal ☐ State ☐ Private ☐ Tribal Trust or Indian Allotment

2. ☒ Pit: Subsection F or G of 19.15.17.11 NMAC
Temporary: ☐ Drilling ☒ Workover
☐ Permanent ☐ Emergency ☐ Cavitation ☐ P&A
☒ Lined ☐ Unlined Liner type: Thickness 12 mil ☐ LLDPE ☒ HDPE ☐ PVC ☐ Other _____
☐ String-Reinforced
Liner Seams: ☐ Welded ☒ Factory ☐ Other _____ Volume: 85 bbl Dimensions: L 10 x W 10 x D 8

3. ☐ Closed-loop System: Subsection H of 19.15.17.11 NMAC
Type of Operation: ☐ P&A ☐ Drilling a new well ☐ Workover or Drilling (Applies to activities which require prior approval of a permit or notice of intent)
☐ Drying Pad ☐ Above Ground Steel Tanks ☐ Haul-off Bins ☐ Other _____
☐ Lined ☐ Unlined Liner type: Thickness _____ mil ☐ LLDPE ☐ HDPE ☐ PVC ☐ Other _____
Liner Seams: ☐ Welded ☐ Factory ☐ Other _____

4. ☐ Below-grade tank: Subsection I of 19.15.17.11 NMAC
Volume: _____ bbl Type of fluid: _____
Tank Construction material: _____
☐ Secondary containment with leak detection ☐ Visible sidewalls, liner, 6-inch lift and automatic overflow shut-off
☐ Visible sidewalls and liner ☐ Visible sidewalls only ☐ Other _____
Liner type: Thickness _____ mil ☐ HDPE ☐ PVC ☐ Other _____

5. ☐ Alternative Method:
Submittal of an exception request is required. Exceptions must be submitted to the Santa Fe Environmental Bureau office for consideration of approval.

Final Closure - Rule 50 permitted pit Closure Date 2/26/09

19.

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): Bellan Mathews Title: Superintendent

Signature: Bellan Mathews Date: 10/24/08

e-mail address: bocilb@PVT Networks.net Telephone: 575-677-2313

20.

OCD Approval: ☐ Permit Application (including closure plan) ☒ Closure Plan (only) ☒ OCD Conditions (see attachment)

OCD Representative Signature: Signed By [Signature] Approval Date: DEC 01 2008

Title: _____ OCD Permit Number: _____

21.

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: 2/24/09

22.

Closure Method:

☐ Waste Excavation and Removal ☐ On-Site Closure Method ☐ Alternative Closure Method ☐ Waste Removal (Closed-loop systems only)
☐ If different from approved plan, please explain.

23.

Closure Report Regarding Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only:

Instructions: Please identify 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 Permit Number: _____

Disposal Facility Name: _____ Disposal Facility Permit Number: _____

Were the closed-loop system operations and associated activities performed on or in areas that will not be used for future service and operations?

☐ Yes (If yes, please demonstrate compliance to the items below) ☐ 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

24.

Closure Report Attachment Checklist: Instructions: Each of the following items must be attached to the closure report. Please indicate, by a check mark in the box, that the documents are attached.

- ☐ Proof of Closure Notice (surface owner and division)
☐ Proof of Deed Notice (required for on-site closure)
☐ Plot Plan (for on-site closures and temporary pits)
☐ Confirmation Sampling Analytical Results (if applicable)
☐ Waste Material Sampling Analytical Results (required for on-site closure)
☐ Disposal Facility Name and Permit Number
☐ Soil Backfilling and Cover Installation
☐ Re-vegetation Application Rates and Seeding Technique
☐ Site Reclamation (Photo Documentation)

On-site Closure Location: Latitude _____ Longitude _____ NAD: ☐ 1927 ☐ 1983

25.

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): Eddie W Seay Title: Agent

Signature: Eddie W Seay Date: 3/3/09

e-mail address: seay_04@leaco.net Telephone: 575-382-2234

Accepted for record
 NMOC

MAR 20 2009

6666

December 22, 2008

New Mexico Oil Conservation Division

RE: Authorized Agent

Eddie Seay is an authorized agent for Burnett Oil Company, Inc. (BOCI) to sign regulatory documents on the behalf of BOCI.

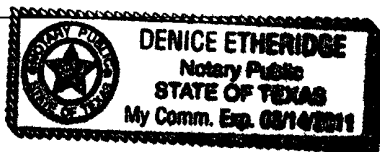
Sincerely,

Mark A. Jacoby

Mark A Jacoby
Engineering Manager

STATE OF TEXAS §
 §
COUNTY OF TARRANT §

This instrument was acknowledged before me on December 22, 2008 by Mark Jacoby, Engineering Manager, Burnett Oil Company.
My Commission Expires



Denice Etheridge

Notary Public



CARDINAL LABORATORIES

101 East Marland, Hobbs, NM 88240

(575) 393-2326 Fax (575) 393-2476

Page ____ of ____

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|-------------------------------------------------------------|--|----------|--|----------------------|--|--------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------|--|----------|--|----------|--|--------|--|------------|--|------------|--|--------|--|------|--|------|--|-----------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|--|--|--|--|--|
| Company Name: Eddie Seay Consulting | | | | BILL TO | | | | ANALYSIS REQUEST | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Project Manager: Eddie Seay | | | | P.O. #: | | | | <div style="display: flex; flex-direction: column; align-items: center;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">BTEX</div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">TPH (GAS)</div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">Chlorides</div> </div> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Address: 601 W Illinois | | | | Company: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| City: Hobbs State: NM Zip: 88242 | | | | Attn: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Phone #: 392-2236 Fax #: 392-6949 | | | | Address: Same | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Project #: Burnett Oil Project Owner: Burnett | | | | City: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Project Name: Jackson 37 Pit | | | | State: Zip: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Project Location: Loco Hills | | | | Phone #: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Sampler Name: Eddie W Seay | | | | Fax #: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| FOR LAB USE ONLY | | Lab I.D. | | Sample I.D. | | (GRAB OR COMPOUND) | | # CONTAINERS | | MATRIX | | PRESERV. | | SAMPLING | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | GROUNDWATER | | WASTEWATER | | SOIL | | OIL | | SLUDGE | | OTHER: | | ACID/BASE: | | ICE / COOL | | OTHER: | | DATE | | TIME | | | | | | | | | | | | | |
| H16827- | | JR-37-1 | | | | ✓ | | 1 | | ✓ | | | | | | | | ✓ | | | | | | 2/4 | | 3:15 | | <div style="display: flex; justify-content: space-around;"> <div>✓</div> <div>✓</div> <div>✓</div> </div> | | | | | | | | | | | |

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| | | | | | | | | | |
|------------------------------|--|-------------------|--|---------------------------------------------------------------------|--|----------------------------------------------------|--|----------------|--|
| Sampler Relinquished: | | Date: 2/5 | | Received By: | | Phone Result: <input type="checkbox"/> No | | Add'l Phone #: | |
| Eddie W Seay | | Time: 9:00 | | | | Fax Result: <input checked="" type="checkbox"/> No | | Add'l Fax #: | |
| Relinquished By: | | Date: | | Received By: | | REMARKS: ASAP Thanks | | | |
| | | Time: | | C. Keene | | | | | |
| Delivered By: (Circle One) | | Temp. | | Sample Condition | | | | | |
| Sampler - UPS - Bus - Other: | | | | Code: Intact | | CHECKED BY: (Initials) | | | |
| | | | | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | cdk | | | |

† Cardinal cannot accept verbal changes. Please fax written changes to 575-393-2476.



PHONE (575) 393-2326 • 101 E. MARLAND • HOBBS, NM 88240

ANALYTICAL RESULTS FOR
EDDIE SEAY CONSULTING
ATTN: EDDIE SEAY
601 W. ILLINOIS
HOBBS, NM 88242
FAX TO: (575) 392-6949

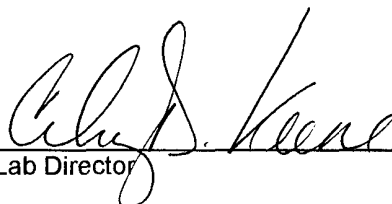
Receiving Date: 02/05/09
Reporting Date: 02/06/09
Project Owner: BURNETT
Project Name: NOT GIVEN
Project Location: LOCO HILLS, NM

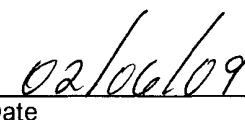
Sampling Date: 02/04/09
Sample Type: SOIL
Sample Condition: COOL & INTACT
Sample Received By: CK
Analyzed By: CK/HM

| LAB NUMBER | SAMPLE ID | GRO | DRO | *Cl |
|-----------------------------|-----------|-----------------------------------------------|-------------------------------------------------|----------|
| | | (C ₆ -C ₁₀) (mg/kg) | (>C ₁₀ -C ₂₈) (mg/kg) | (mg/kg) |
| ANALYSIS DATE | | 02/05/09 | 02/05/09 | 02/05/09 |
| H16827-1 | JB-37-1 | <10.0 | 18.0 | 192 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Quality Control | | 493 | 501 | 500 |
| True Value QC | | 500 | 500 | 500 |
| % Recovery | | 98.6 | 100 | 100 |
| Relative Percent Difference | | 3.6 | 4.5 | < 0.1 |

METHODS: TPH GRO & DRO: EPA SW-846 8015 M; Std. Methods 4500-CF B

* Note: Analysis performed on a 1:4 w:v aqueous extract.


Lab Director


Date

H16827 TCL SEAY

PLEASE NOTE **Liability and Damages.** Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whatsoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of services hereunder by Cardinal, regardless of whether such claim is based upon any of the above-stated reasons or otherwise. Results relate only to the samples identified above. This report shall not be reproduced except in full with written approval of Cardinal Laboratories.



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ANALYTICAL RESULTS FOR
EDDIE SEAY CONSULTING
ATTN: EDDIE SEAY
601 W. ILLINOIS
HOBBS, NM 88242
FAX TO: (575) 392-6949

Receiving Date: 02/05/09
Reporting Date: 02/06/09
Project Owner: BURNETT
Project Name: NOT GIVEN
Project Location: LOCO HILLS, NM

Sampling Date: 02/04/09
Sample Type: SOIL
Sample Condition: COOL & INTACT
Sample Received By: CK
Analyzed By: ZL


| LAB NUMBER | SAMPLE ID | | | | |
|-----------------------------|-----------|--------------------|--------------------|-----------------------------|-----------------------------|
| | | BENZENE (mg/kg) | TOLUENE (mg/kg) | ETHYL BENZENE (mg/kg) | TOTAL XYLENES (mg/kg) |
| ANALYSIS DATE | | 02/05/09 | 02/05/09 | 02/05/09 | 02/05/09 |
| H16827-1 | JB-37-1 | <0.050 | <0.050 | <0.050 | <0.150 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Quality Control | | 0.058 | 0.057 | 0.054 | 0.167 |
| True Value QC | | 0.050 | 0.050 | 0.050 | 0.150 |
| % Recovery | | 116 | 114 | 108 | 111 |
| Relative Percent Difference | | 1.7 | 2.4 | <1.0 | <1.0 |

METHOD: EPA SW-846 8021B

TEXAS NELAP CERTIFICATION T104704398-08-TX FOR BENZENE, TOLUENE, ETHYL BENZENE,
AND TOTAL XYLENES.



Chemist



Date

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MAR 04 2009

March 3, 2009

NMOCD Artesia
ATTN: Mike Bratcher
1301 W. Grand Ave.
Artesia, NM 88210

RE: Burnett Oil Co.
Jackson B #37
C-144 Final Report

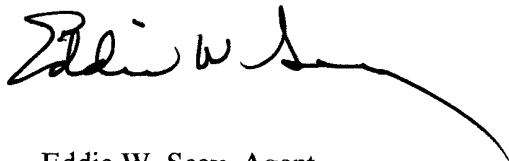
Mr. Bratcher:

We have completed the closing of the above listed pit. All pit contents were hauled to CRI for disposal. Seeding will be conducted as OCD requires.

Also find copy of letter authorizing me to sign closure.

If you have any questions, please call.

Thanks,

A handwritten signature in black ink, appearing to read "Eddie W. Seay", with a long, sweeping horizontal line extending to the right.

Eddie W. Seay, Agent
Eddie Seay Consulting
601 W. Illinois
Hobbs, NM 88242
(575)392-2236
seay04@leaco.net

cc: Burnett Oil