FAX NO. 15757462523

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July 21, 2008

Form C-144 CLEZ

District 1 1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> 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

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For closed-loop systems that only use above ground steel tunks 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 hins and propose to implement waste removal for closure)						
Type of action: Permit Closure						
Instructions: Please submit one application (Form C-144 CLEZ) per individual closed-loop system request. For any application request other than for a 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.						
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 ordinar						
Operator: Premier Oil & Gas, Inc. OGRID #: 17985						
Address: P.O. Box 1246, Artesja, N.M. 88211-1246						
Facility or well name; Dale H. Parke B Tr. C #24						
API Number: 30-015-36761 OCD Permit Number: 209844						
U/L or Qtr/Qtr Unit A Section 15 Township 17-S Range 30-F. County: Eddy						
Center of Proposed Design: Latitude Longitude NAD: 1927 1983						
Surface Owner: State Private Tribal Trust or Indian Allotment						
Butther Office. (2) 1 cooks (2						
☐ Closed-loop System: Subsection It of 19.15.17.11 NMAC						
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 ☒ Haul-off Bins						
ð.						
Signs: Subsection C of 19.15.17.11 NMAC						
12"x 24", 2" lettering, providing Operator's name, site location, and emergency telephone numbers						
Signed in compliance with 19.15.3.103 NMAC						
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:						
Proviously Approved Operating and Maintenance Plan API Number:						
Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only: (19.15.17.13.D 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: R-9166						
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 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 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						
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.						
Nume (Print): Nancy T, Agnew Title: Land Department						
Signature: Date: 1/13/10						
c-mail address: tandtech@marbob.com Telephone: 575-748-3303						
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OCD Approval: Permit Application (including closure plan) Closure P	- / · · · · · · · · · · · · · · · · · ·					
OCD Representative Signature: Thurs K Incle Approval Date: 1/13/2010						
Title: DIST IL Supervisor	OCD Permit Number: 209844					
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:						
5. 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 Permit Number:					
Disposal Facility Nume:	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) \sum No						
Required for impacted areas which will not be used for future service and operate Site Reclamation (Photo Documentation) Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique	ions:					
Operator Closure Certification: Thereby 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):	Title:					
Signature:	Date:					
e-mail address:	Telophone:					

Design Plan Operating and Maintenance Plan Closure Plan

Dale H. Parke B Tr. C #24 380' FNL & 940' FEL Section 15, T17S – R30E Eddy County, New Mexico

Marbob will be using all above ground steel pits for fluid and cuttings while drilling. If any tank develops a leak we will have immediate visual discovery, we would then transfer the fluid to another tank then remove any contaminated soil and dispose of it in the cuttings bins for transportation. All leaks should be kept to less than 5 barrels. Rig crews will monitor the tanks at all times.

Equipment List:

- 1-Rig Shale Shaker
- I- Clacko Settling Tank
- 2- Roll Off Bins w/ Tracks
- 1-500 BBL Frac Tank

During drilling operations all liquids, drilling fluids and cuttings will be hauled off via CRI (Controlled Recovery Inc.) Permit R-9166 or any other approved facility.