District 1 1625 N. French Dr., Hobbs, NM 88240 District II 1301 W. Grand Avenue, Artesia, NM 88210 District III
1000 Río 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

	HEGEIVEL		
g	MAY 26 2010 NNOCD ARTES or closed-loop systems the round steel tanks or haul- timplement waste removal the appropriate NMOCD	SIA at-onl off bil	ns and propose closure, submit

Closed-Loop System Permit or Closure Plan Application

(that only use above ground stee	l tanks or haul-off bins and propose i	<u>to implement waste removal for closure)</u>

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 she environment. Nor does approval relieve the operator of its responsibility to comply with a	ould operations result in pollution of surface water, ground water or the any other applicable governmental authority's rules, regulations or ordinances.
Operator: Bunt O.1 Co Inc	·OGRID#: 003080
	501 Jr Tr Atraw tro
Facility or well name: Jackson B + 41	Off Walth
1 10000	rmit Number: 210324
U/L or Qtr/Qtr H Section 24 Township 17	
Center of Proposed Design: LatitudeLongitu	
Surface Owner: X Federal State Private Tribal Trust or Indian Allotmen	I .
2. ☐ Closed-loop System: Subsection H of 19.15.17.11 NMAC Operation: ☐ Drilling a new well ☐ Workover or Drilling (Applies to activities v ☐ Above Ground Steel Tanks or ☐ Haul-off Bins	which require prior approval of a permit or notice of intent) P&A
3.	
Signs: Subsection C of 19.15.17.11 NMAC	Adambana gumbara
☐ 12"x 24", 2" lettering, providing Operator's name, site location, and emergency Signed in compliance with 19.15.3.103 NMAC	telephone numbers
Signed in compilance with 19.15.3.103 NMAC	
Closed-loop Systems Permit Application Attachment Checklist: Subsection B Instructions: Each of the following items must be attached to the application. Plattached. Design Plan - based upon the appropriate requirements of 19.15.17.11 NMAG Operating and Maintenance Plan - based upon the appropriate requirements of Closure Plan (Please complete Box 5) - based upon the appropriate requirements of Previously Approved Design (attach copy of design) API Number: Previously Approved Operating and Maintenance Plan API Number:	ease indicate, by a check mark in the box, that the documents are C f 19.15.17.12 NMAC
Waste Removal Closure For Closed-loop Systems That Utilize Above Ground S	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, a facilities are required.	rilling fluids and drill cuttings. Use attachment if more than two
	Disposal Facility Permit Number: NM. 01 - 006
	Disposal Facility Permit Number:
Will any of the proposed closed-loop system operations and associated activities occur. Yes (If yes, please provide the information below) \(\) No	cur on or in areas that will not be used for future service and operations?
Required for impacted areas which will not be used for future service and operation Soil Backfill and Cover Design Specifications based upon the appropriate Re-vegetation Plan - based upon the appropriate requirements of Subsection I Site Reclamation Plan - based upon the appropriate requirements of Subsection	requirements of Subsection H of 19.15.17.13 NMAC of 19.15.17.13 NMAC
6. 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): Eddie W Seas	Title: Asent
Signature: Edd La	Date: 5 35 10
e-mail address: 500, 84 @ leaco net	Telephone: <u>876.594.273</u> 6

OCD Approval: Permit Application (including closure plan) Closure F	lan (only)				
OCD Representative Signature: Tewns Robel	Approval Date: 05 106/2010				
Title: DIST R Syservisor	OCD Permit Number: 2/0324				
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.					
Disposal Facility Name:	Disposal Facility Permit Number:				
Disposal Facility Name:					
Were the closed-loop system operations and associated activities performed on or \(\sum \) Yes (If yes, please demonstrate compliance to the items below) \(\sum \) No	in areas that will not be used for future service and operations?				
Required for impacted areas which will not be used for future service and operation: Site Reclamation (Photo Documentation) Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique	ons:				
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):	Title:				
Signature:	Date:				
e-mail address:	Telephone:				

Form C-144 CLEZ

Oil Conservation Division

Page 2 of 2



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

Engineering Manager

STATE OF TEXAS

9

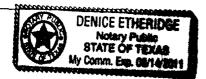
8

S

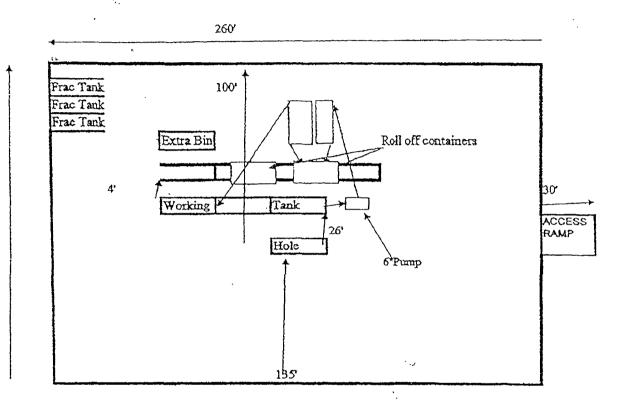
COUNTY OF TARRANT §

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

My Commission Expires

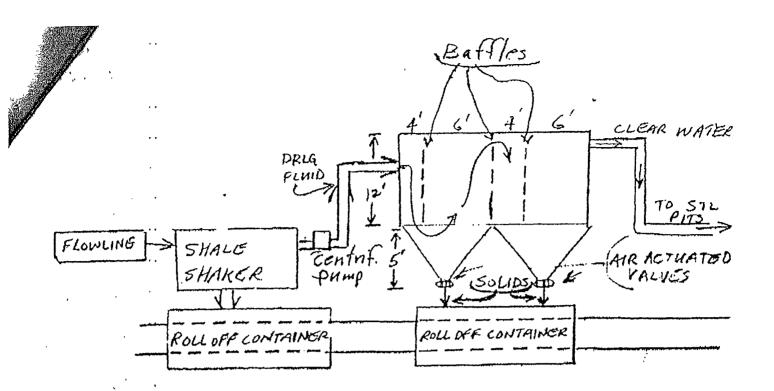


Notary Public



BURNETT OIL CO., INC. PROPOSED DRILL SITE LAYOUT

235



OPERATIONAL & MAINTENANCE:

Drilling fluid coming out of wellbore will go
through flowline across shale shaker. Solids will
drop into roll-off bins. Drilling fluid will be
pumped into containers with baffles as drown
above. Baffles slow fluid velocity to allow
solids to fall down through 6 air actuated
valves into roll-off containers. Clean water
goes out back to drilling fluid steerpits.
Solids are hauled to disposal. Leftover
lighted will be hauled to disposal.

BURNETT OIL CO. INC

Operation and Maintenance

Closed Loop equipment will be inspected daily by each tour and any necessary maintenance performed Any leak in system will be repaired and/or contained immediately

OCD notified within 48 hours

Remediation process started

Closure Plan

During drilling operations all liquids, drilling fluids and cuttings will be hauled off via CRI (Controlled Recovery Incorporated Permit R-9166).

11-24-2010 04:23				
Form 9160-5	UNITED :			FORM APPROVED OMB No 1004-0197
(August 2007)	DEPARTMENT OF			Expires: July 31, 2010
	BUREAU OF LAND		_,,	5. Lease Serial No. NMLC055264
_ S/	INDRY NOTICES AND	REPORTS ON W	ELLS	6. If Indian, Allottee or Tribe Name
Do r aban	ot use this form for propo doned well. Use Form 316	0-3 (APD) for such p	roposals.	
SUB	WIT IN TRIPLICATE - ON	ner instructions on	page 2	7, If Unit or CA/Agreement, Name and/or No.
I. Type of Well				
Oil Well Gas We	II Other			8. Well Name and No. JACKSON B #41
2. Name of Operator	NETT OIL CO., INC.	,		9. API Wall No.
	STREET, SUITE 1600 38	. Phone No. (include area co	de)	30-015-33133
INIT #9 FORT WO	RTH, TX. 76102-6881	(817) 332-51		10. Field and Poel, or Exploratory Area
A Location of Wall (Footage,)	isc. T. R. M., or Survey Description	v)		CEDAR LAKE GLORIETA YES
UNIT A, 330' F	FNL, 380' FEL, SEC 24. NL, 1086' FEL, SEC 24,	T178, R30E- BH (F	roposea)	11. County or Perish, State EDDY COUNTY, N.M.
12. CHE	CK APPROPRIATE BOX(E	S) TO INDICATE NA	TURE OF NOTICE, RE	PORT, OR OTHER DATA
TYPE OF SUBMISS	ON		TYPE OF ACTION	
	Aoidiza	Д Dесрев	Production (Start/Resume	e) Water Shut-Off
Notice of Intest	Alter Casing	Fracture Treat	Reclamantion	Well Integrity
Subsequent Report	Casing Repair	New Construction	Recomplete	DOWN HORIZONTAL
Final Abandonment Notice	Change Plans	Plug and Abenden	Temporarily Abandon	·
	Convert to Injection	Plug Baok	Water Disposal	y proposed work and approximate duration thereof
following completion of the stating has been completed determined that the site is not resent well bore stated that the site is not resent well bore stated that the site is not resent well bore stated that the site is not resent well bore stated that the site is not resent that the	he involved operations. If the operated Finel Abandonment Notices sheaty for final inspection.) The completed on 4/02/2 ELL PAD SITE WILL HATE TO COMPLETE TO CO	retion results in a metriple still be filed only after all action in the well bo 2009. Plug test to AVE TO BE INCRE. CUT 6-1/8" WINDOV	completion or recompletion in requirements, including reclaim for was 3673' before '620# for 30 minutes ASED TO PLACE DR V IN EXISTING 7" 23	a new interval, a Rorm 3160-4 shall be filled oncumulation, have been completed, and the operator has T&A. TOC was tagged @ 3378' was witnessed by BLM's ILLING EQUIPMENT. # CASING AT APPROX 3300'.
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