

William Palmer
Read & Stevens, Inc
PO Box 1719
Lovington, NM 88260

Mike Bratcher
Oil Conservation Division
1301 W. Grand Avenue
Artesia, NM 88210

30-015-26064

August 10, 2005

RECEIVED
AUG 12 2005
OCCUPANCY


Dear Mike,

Read & Stevens, Inc is in receipt of your Notice of Violation letter dated July 21, 2005 and concerning a surface leak on our Jamie Federal #1 lease located in UL C of section 14, TWP - 18S, RGE - 31E. Your inspection number is iMLB0520045383.

On August 3, 2005, contaminated soil was removed from the area and placed in a land farm located near Maljamar, NM. A copy of the manifest is accompanying this letter. The containment vessel at the site was replaced with a larger vessel and plumbed accordingly.

If we may be of further assistance, please do not hesitate to let us know.

Thank you,


William V. Palmer
Superintendent

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

Manifest Doc. No.

2. Page 1
of

3. Generator's Name and Mailing Address

Reed - Stevens Inc

*JAMIE FED #1
30-015-26064*

4. Generator's Phone ()

1177-2-1400-20

7784

5. Transporter 1 Company Name

6

US EPA ID Number

A. Transporter's Phone

7. Transporter 2 Company Name

8

US EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

10

US EPA ID Number

C. Facility's Phone

**ARTESIA AERATION, L.L.C.
MALJAMAR, NM**

11. Waste Shipping Name and Description

12. Containers

No.

Type

13. Total
Quantity

14. Unit
Wt/Vol

a.

Water - 41 L

b.

72.4

c.

0.43

d.

D. Additional Descriptions for Materials Listed Above

E. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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OCU-ARTESIA

16. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.

Printed/Typed Name

Signature

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of wasted material covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

CANARY - TRANSPORTER 2