District 1 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 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

orm C-144 June 16, 2008

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

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

Closure of a pit, closed-loop system, below-grade tank, or proposed alternative method

JUN 20 2008 OCD-ARTESIA Permit of a pit, closed-loop system, below-grade tank, or proposed alternative method

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 Operator: Mack Energy Corporation __ OGRID #· 013837 P.O. Box 960 Artesia, NM 88211-0960 Facility or well name: Robin Federal #2 API Number: 30-015-36046 OCD Permit Number: 36091 U/L or Qtr/Qtr K Section 9 Township 23S Range 25E County: Eddy, NM Center of Proposed Design: Latitude ___ ______ Longitude ______ NAD: 🗌 1927 🔲 1983 Surface Owner: Federal State Private Tribal Trust or Indian Allotment Pit: Subsection F or G of 19.15.17.11 NMAC Closed-loop System: Subsection H of 19.15.17.11 NMAC Temporary: Drilling Workover ☐ Drying Pad ☐ Tanks ☒️ Haul-off Bins ☐ Other _____ ☐ Permanent ☐ Emergency ☐ Cavitation ☐ Lined ☐ Unlined ☐ Lined ☐ Unlined ☐ Other _____ _____ String-Reinforced Seams: Welded Factory Other Volume: _____bbl ____ yd³ Seams: Welded Factory Other Volume: bbl Dimensions: L x W x D Dimensions: Length____ x Width____ Below-grade tank: Subsection I of 19.15.17.11 NMAC Fencing: Subsection D of 19.15.17.11 NMAC Volume: _____bbl Chain link, six feet in height, two strands of barbed wire at top Four foot height, four strands of barbed wire evenly spaced between one and Type of fluid: Tank Construction material: Secondary containment with leak detection Netting: Subsection E of 19.15.17.11 NMAC Visible sidewalls, liner, 6-inch lift and automatic overflow shut-off ☐ Screen ☐ Netting ☐ Other___ ☐ Visible sidewalls and liner ☐ Monthly inspections ☐ Visible sidewalls only Signs: Subsection C of 19.15.17.11 NMAC Other 12'x24', 2' lettering, providing Operator's name, site location, and Liner type: Thickness _____ mil HDPE PVC emergency telephone numbers ☐ Other ☐ Signed in compliance with 19.15.3.103 NMAC Alternative Method: Administrative Approvals and Exceptions:

of approval.

Submittal of an exception request is required. Exceptions must be

submitted to the Santa Fe Environmental Bureau office for consideration

blank:

19.15.17 NMAC for guidance.

consideration of approval.

Justifications and/or demonstrations of equivalency are required. Please refer to

Please check a box if one or more of the following is requested, if not leave

Administrative approval(s): Requests must be submitted to the appropriate division district or the Santa Fe Environmental Bureau office for

Exception(s): Requests must be submitted to the Santa Fe Environmental Bureau office for consideration of approval.

Siting Criteria (regarding permitting): 19.15.17 10 NMAC Instructions: The applicant must demonstrate compliance for each siting criteria below in the application. Recommendations of acceptable source material are provided below. Requests regarding changes to certain siting criteria may require administrative approval from the appropriate district office or may be considered an exception which must be submitted to the Santa Fe Environmental Bureau office for consideration of approval. Applicant must attach justification for request. Please refer to 19.15.17.10 NMAC for guidance. Siting criteria does not apply to drying pads or above-grade tanks associated with a closed-loop system.	
Ground water is less than 50 feet below the bottom of the temporary pit, permanent pit, or below-grade tank. - NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells	☐ Yes ☐ No
Within 300 feet of a continuously flowing watercourse, or 200 feet of any other watercourse, lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark). - Topographic map; Visual inspection (certification) of the proposed site	☐ Yes ☐ No
Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application. (Applies to temporary, emergency, or cavitation pits and below-grade tanks) - Visual inspection (certification) of the proposed site; Aerial photo; Satellite image	☐ Yes ☐ No ☐ NA
Within 1000 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application. (Applies to permanent pits) - Visual inspection (certification) of the proposed site; Aerial photo: Satellite image	☐ Yes ☐ No ☐ NA
Within 500 horizontal feet of a private, domestic fresh water well or spring that less than five households use for domestic or stock watering purposes, or within 1000 horizontal feet of any other fresh water well or spring, in existence at the time of initial application. - NM Office of the State Engineer - iWATERS database search; Visual inspection (certification) of the proposed site	☐ Yes ☐ No
Within incorporated municipal boundaries or within a defined municipal fresh water well field covered under a municipal ordinance adopted pursuant to NMSA 1978, Section 3-27-3, as amended. - Written confirmation or verification from the municipality; Written approval obtained from the municipality	☐ Yes ☐ No
Within 500 feet of a wetland. - US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site	☐ Yes ☐ No
Within the area overlying a subsurface mine. - Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division	☐ Yes ☐ No
Within an unstable area. - Engineering measures incorporated into the design; NM Bureau of Geology & Mineral Resources; USGS; NM Geological Society; Topographic map	☐ Yes ☐ No
Within a 100-year floodplain FEMA map	☐ Yes ☐ No
Temporary Pits, Emergency Pits, and Below-grade Tanks Permit Application Attachment Checklist: Subsection B of 19.15.17.9	
Instructions: Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the de attached.	ocuments are
Hydrogeologic Report (Below-grade Tanks) - based upon the requirements of Paragraph (4) of Subsection B of 19.15.17.15 NMAC Hydrogeologic Data (Temporary and Emergency Pits) - based upon the requirements of Paragraph (2) of Subsection B of 19.15.17.15 Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC 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 - 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: or Permit Number:	
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 de attached. Geologic and Hydrogeologic Data (required for on-site closure) - based upon the requirements of Paragraph (3) of Subsection B of Siting Criteria Compliance Demonstrations (required for on-site closure) - based upon the appropriate requirements of 19.15.17.10 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 - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC	£ 19.15 17 15
☐ Previously Approved Design (attach copy of design) API Number	

Permanent Pits Permit Application 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 do	ocuments are		
attached. Hvdrogeologic Report - based upon the requirements of Paragraph (1) of Subsection B of 19 15 17 15 NMAC			
Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19 15.17.10 NMAC			
Climatological Factors Assessment			
Certified Engineering Design Plans - based upon the appropriate requirements of 19.15 17 11 NMAC			
Dike Protection and Structural Integrity Design - based upon the appropriate requirements of 19.15.17.11 NMAC			
Leak Detection Design - based upon the appropriate requirements of 19.15.17.11 NMAC			
Liner Specifications and Compatibility Assessment - based upon the appropriate requirements of 19 15.17.11 NMAC			
Ouality Control/Quality Assurance Construction and Installation Plan			
Operating and Maintenance Plan - based upon the appropriate requirements of 19 15 17.12 NMAC			
Freeboard and Overtopping Prevention Plan - based upon the appropriate requirements of 19.15.17 11 NMAC			
☐ Nuisance or Hazardous Odors, including H ₂ S, Prevention Plan			
Emergency Response Plan			
Oil Field Waste Stream Characterization			
Monitoring and Inspection Plan			
☐ Erosion Control Plan ☐ Closure Plan - based upon the appropriate requirements of Subsection C of 19 15.17.9 NMAC and 19.15 17.13 NMAC			
Proposed Closure: 19.15.17.13 NMAC			
Type: Drilling Workover Emergency Cavitation Permanent Pit Below-grade Tank Closed-loop System Alternative			
	•		
Proposed Closure Method: Waste Excavation and Removal			
On-site Closure Method (only for temporary pits and closed-loop systems)			
☐ In-place Burial ☐ On-site Trench Burial			
Alternative Closure Method (Exceptions must be submitted to the Santa Fe Environmental Bureau for con	sideration)		
Siting Criteria (regarding on-site closure methods only): 19.15.17.10 NMAC			
Instructions: Each siting criteria requires a demonstration of compliance in the closure plan. Recommendations of acceptable			
source material are provided below. Requests regarding changes to certain siting criteria may require administrative approval from			
the appropriate district office or may be considered an exception which must be submitted to the Santa Fe Environmental Bureau			
office for consideration of approval. Justifications and/or demonstrations of equivalency are required. Please refer to 19.15.17.10			
NMAC for guidance.			
Ground water is less than 50 feet below the bottom of the buried waste.	☐ Yes ☐ No		
- NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells	□ NA		
Ground water is between 50 and 100 feet below the bottom of the buried waste	☐ Yes ☐ No		
- NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells	□ NA		
Good and the 100 feet below the bound of the			
Ground water is more than 100 feet below the bottom of the buried waste. - NM Office of the State Engineer - iWATERS database search; USGS, Data obtained from nearby wells	☐ Yes ☐ No		
- NM Office of the State Engineer - TWATERS database search; USGS, Data obtained from nearby wells	□ NA		
Within 300 feet of a continuously flowing watercourse, or 200 feet of any other watercourse, lakebed, sinkhole, or playa lake	☐ Yes ☐ No		
(measured from the ordinary high-water mark).	1c3 110		
- Topographic map; Visual inspection (certification) of the proposed site			
Topographic map, when improved the proposed one			
Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application.	☐ Yes ☐ No		
- Visual inspection (certification) of the proposed site; Aerial photo; Satellite image			
Within 500 horizontal feet of a private, domestic fresh water well or spring that less than five households use for domestic or stock	☐ Yes ☐ No		
watering purposes, or within 1000 horizontal feet of any other fresh water well or spring, in existence at the time of initial application.			
- NM Office of the State Engineer - iWATERS database; Visual inspection (certification) of the proposed site			
Within incorporated municipal boundaries or within a defined municipal fresh water well field covered under a municipal ordinance	☐ Yes ☐ No		
adopted pursuant to NMSA 1978, Section 3-27-3, as amended.	1C3 110		
- Written confirmation or verification from the municipality; Written approval obtained from the municipality			
Within 500 feet of a wetland.	☐ Yes ☐ No		
- US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site			
THE STATE OF THE S			
Within the area overlying a subsurface mine.	☐ Yes ☐ No		
- Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division			
Within an unstable area.			
- Engineering measures incorporated into the design; NM Bureau of Geology & Mineral Resources; USGS; NM Geological	☐ Yes ☐ No		
Society; Topographic map	30 (10		
Within a 100-year floodplain.	☐ Yes ☐ No		

Waste Excavation and Removal Closure Plan Checklist: (19 15 17.13 NMAC			
closure plan. Please indicate, by a check mark in the box, that the documents are attached.			
Protocols and Procedures - based upon the appropriate requirements of 19.15.17.13 NMAC Confirmation Sampling Plan (if applicable) - based upon the appropriate requirements of Subsection F of 19.15.17.13 NMAC			
Disposal Facility Name and Permit Number (for liquids, drilling fluids and			
Soil Backfill and Cover Design Specifications - based upon the appropriate			
Re-vegetation Plan - based upon the appropriate requirements of Subsection			
Site Reclamation Plan - based upon the appropriate requirements of Subsection			
Waste Removal Closure For Closed-loop Systems That Utilize Haul-off Bins 6	Only: (19.15.17.13.D. NMAC) Instructions: Plancy indentify the facility		
or facilities for the disposal of liquids, drilling fluids and drill cuttings.	19 19.17.15.19 HMAC, manuclions. Theuse indentity the facility		
Disposal Facility Name: Controlled Recovery Inc.	Disposal Facility Permit Number: R-9166		
On-Site Closure Plan Checklist: (19.15.17 13 NMAC) Instructions: Each of the			
by a check mark in the box, that the documents are attached.	te jouoming tiems must be unificited to the closure plant. I lease indicate,		
Siting Criteria Compliance Demonstrations - based upon the appropriate rec	quirements of 19 15 17 10 NMAC		
Proof of Surface Owner Notice - based upon the appropriate requirements o			
Construction and Design of Burial Trench (if applicable) based upon the ap			
Protocols and Procedures - based upon the appropriate requirements of 19.1			
Confirmation Sampling Plan (if applicable) - based upon the appropriate rec			
Waste Material Sampling Plan - based upon the appropriate requirements of			
 Disposal Facility Name and Permit Number (for liquids, drilling fluids and one Soil Cover Design - based upon the appropriate requirements of Subsection 			
Re-vegetation Plan - based upon the appropriate requirements of Subsection			
Site Reclamation Plan - based upon the appropriate requirements of Subsection	ion G of 19.15.17.13 NMAC		
Operator Application Certification:			
I hereby certify that the information submitted with this application is true, accura-	te and complete to the best of my knowledge and belief.		
Name (Print):Jerry W. Sherrell	Title: Production Clerk		
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Signature: Jerry W. Thenoll	Date: <u>June 19, 2008</u>		
e-mail address: jerrys@mackenergycorp.com	m: (575) 7/0 1000		
	Telephone: (5/5) /48=1/88		
	Telephone:(575) 748-1288		
OCD Approval: Application (including closurs plan) L. Closure Pla	ın (only)		
OCD Approval: Permit Application (including closure plan) Closure Plan	ın (only)		
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OCD Approval: Permit Application (including closure plan) Colosure Plan OCD Representative Signature: Title: Closure Report (required within 60 days of closure completion): Subsection & Closure Method:	Approval Date: 6/20/08 OCD Permit Number: 0 2 08/5 Of 19.15.17.13 NMAC Closure Completion Date:		
OCD Approval: Permit Application (including closure plan) Closure Plan OCD Representative Signature: Title: Closure Report (required within 60 days of closure completion): Subsection & Closure Wethod: Waste Excavation and Removal On-Site Closure Method Alternation If different from approved plan, please explain.	Approval Date: 6/20/08 OCD Permit Number: 0 2 08/5 Cof 19.15.17.13 NMAC Closure Completion Date:		
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OCD Approval: Permit Application (including closure plan) Closure Plan OCD Representative Signature: Title: Closure Report (required within 60 days of closure completion): Subsection Re Closure Wethod: Waste Excavation and Removal On-Site Closure Method Alternation If different from approved plan, please explain. Closure Report Attachment Checklist: Instructions: Each of the following itemmark in the box, that the documents are attached.	Approval Date: 6/20/08 OCD Permit Number: 0 2 08/5 Cof 19.15.17.13 NMAC Closure Completion Date:		
OCD Approval: Permit Application (including closure plan) Closure Plan OCD Representative Signature: Title: Closure Report (required within 60 days of closure completion): Subsection K Closure Wethod: Waste Excavation and Removal On-Site Closure Method Alternation If different from approved plan, please explain. Closure Report Attachment Checklist: Instructions: Each of the following item mark in the box, that the documents are attached. Proof of Closure Notice Proof of Deed Notice (if applicable) Plot Plan	Approval Date: 6/20/08 OCD Permit Number: 0 2 08/5 Cof 19.15.17.13 NMAC Closure Completion Date:		
OCD Approval: Permit Application (including closure plan) Closure Plat OCD Representative Signature: Title: Closure Report (required within 60 days of closure completion): Subsection K Closure Wethod: Waste Excavation and Removal On-Site Closure Method Alternation If different from approved plan, please explain. Closure Report Attachment Checklist: Instructions: Each of the following item mark in the box, that the documents are attached. Proof of Closure Notice Proof of Deed Notice (if applicable) Plot Plan Confirmation Sampling Analytical Results	Approval Date: 6/20/08 OCD Permit Number: 0 2 08/5 Cof 19.15.17.13 NMAC Closure Completion Date:		
OCD Approval: Permit Application (including closure plan) OCD Representative Signature: Title: Closure Report (required within 60 days of closure completion): Subsection Report (required within 60 days of closure Closure Method: Waste Excavation and Removal On-Site Closure Method Alternation If different from approved plan, please explain. Closure Report Attachment Checklist: Instructions: Each of the following item mark in the box, that the documents are attached. Proof of Closure Notice Proof of Deed Notice (if applicable) Plot Plan Confirmation Sampling Analytical Results Waste Material Sampling Analytical Results	Approval Date: 6/20/08 OCD Permit Number: 0 2 08/5 Cof 19.15.17.13 NMAC Closure Completion Date:		
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OCD Approval: Permit Application (including closure plan) OCD Representative Signature: Title: Closure Report (required within 60 days of closure completion): Subsection Region Matternation Waste Excavation and Removal On-Site Closure Method Alternation If different from approved plan, please explain. Closure Report Attachment Checklist: Instructions: Each of the following item mark in the box, that the documents are attached. Proof of Closure Notice Proof of Deed Notice (if applicable) Plot Plan Confirmation Sampling Analytical Results Waste Maternal Sampling Analytical Results 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 Longitum	Approval Date: 6/20/08 OCD Permit Number: 0208/5 Cof 19.15.17.13 NMAC Closure Completion Date: ive Closure Method ons must be attached to the closure report. Please indicate, by a check		
OCD Approval: Permit Application (including closure plan) OCD Representative Signature: Title: Closure Report (required within 60 days of closure completion): Subsection Report (required within 60 days of closure completion): Subsection Report Method: Waste Excavation and Removal On-Site Closure Method Alternation	Approval Date: 6/20/08 OCD Permit Number: 0 2 08/5 Cof 19.15.17.13 NMAC Closure Completion Date: ive Closure Method ms must be attached to the closure report. Please indicate, by a check de		
OCD Approval: Permit Application (including closure plan) OCD Representative Signature: Title: Closure Report (required within 60 days of closure completion): Subsection Report (required within 60 days of closure completion): Subsection Report Method: Waste Excavation and Removal On-Site Closure Method Alternation	Approval Date: 6/20/08 OCD Permit Number: 0 2 08/5 Cof 19.15.17.13 NMAC Closure Completion Date: ive Closure Method ms must be attached to the closure report. Please indicate, by a check deNAD: 1927 1983 port is true, accurate and complete to the best of my knowledge and		
OCD Approval: Permit Application (including closure plan) Closure Plat OCD Representative Signature: Title: Closure Report (required within 60 days of closure completion): Subsection Keeping Market Excavation and Removal On-Site Closure Method Alternation If different from approved plan, please explain. Closure Report Attachment Checklist: Instructions: Each of the following item mark in the box, that the documents are attached. Proof of Closure Notice Proof of Deed Notice (if applicable) Plot Plan Confirmation Sampling Analytical Results Waste Material Sampling Analytical Results 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 Longitue Operator Closure Certification: I hereby certify that the information and attachments submitted with this closure requirements belief. I also certify that the closure complies with all applicable closure requirements.	Approval Date: 6/20/08 OCD Permit Number: 0 2 08/5 Cof 19.15.17.13 NMAC Closure Completion Date: ive Closure Method ms must be attached to the closure report. Please indicate, by a check de		
OCD Approval: Permit Application (including closure plan) OCD Representative Signature: Title: Closure Report (required within 60 days of closure completion): Subsection Report (required within 60 days of closure completion): Subsection Report Method: Waste Excavation and Removal On-Site Closure Method Alternation	Approval Date: 6/20/08 OCD Permit Number: 0 2 08/5 Cof 19.15.17.13 NMAC Closure Completion Date: ive Closure Method ms must be attached to the closure report. Please indicate, by a check de		
OCD Approval: Permit Application (including closure plan) Closure Plan OCD Representative Signature: Title: Closure Report (required within 60 days of closure completion): Subsection Recompleted and Removal On-Site Closure Method Alternation If different from approved plan, please explain. Closure Report Attachment Checklist: Instructions: Each of the following items in the box, that the documents are attached. Proof of Closure Notice Proof of Deed Notice (if applicable) Plot Plan Confirmation Sampling Analytical Results Waste Material Sampling Analytical Results 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 Longitus Operator Closure Certification: I hereby certify that the closure complies with all applicable closure requirements Name (Print):	Approval Date: 6/20/08 Cof 19.15.17.13 NMAC Closure Completion Date: ive Closure Method ms must be attached to the closure report. Please indicate, by a check de		
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Mack Energy Closed Loop System Design Plan

Equipment list,

- 2-414 Swaco Centrifuges
- 2-4 screen Mongoose shale shakers
- 2- 250 BBL tanks to hold fluid
- 2- CRI Bins with track system
- 2- 500 BBL frac tanks for fresh water
- 2-500 BBL frac tanks for brine water

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).