

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

Form C-144
July 21, 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

- 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: Forest Oil OGRID #: 8041
Address: 3504 NW County Rd Hobbs, NM 88240
Facility or well name: Skelly Unit #89
API Number: 30-015-05429 OCD Permit Number: _____
U/L or Qtr/Qtr B Section 28 Township 17S Range 31E County: Eddy
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: 50 bbl Dimensions: L 15' x W 15' x D 5'

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 Date 1/16/09

6.

Fencing: Subsection D of 19.15.17.11 NMAC (*Applies to permanent pits, temporary pits, and below-grade tanks*)

- ☐ Chain link, six feet in height, two strands of barbed wire at top (*Required if located within 1000 feet of a permanent residence, school, hospital, institution or church*)
- ☐ Four foot height, four strands of barbed wire evenly spaced between one and four feet
- ☐ Alternate. Please specify _____

7.

Netting: Subsection E of 19.15.17.11 NMAC (*Applies to permanent pits and permanent open top tanks*)

- ☐ Screen ☐ Netting ☐ Other _____
- ☐ Monthly inspections (If netting or screening is not physically feasible)

8.

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

9.

Administrative Approvals and Exceptions:

Justifications and/or demonstrations of equivalency are required. Please refer to 19.15.17 NMAC for guidance.

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

- ☐ Administrative approval(s): Requests must be submitted to the appropriate division district or the Santa Fe Environmental Bureau office for consideration of approval.
- ☐ Exception(s): Requests must be submitted to the Santa Fe Environmental Bureau office for consideration of approval.

10.

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	<input type="checkbox"/> Yes <input type="checkbox"/> No
Within 300 feet of a continuously flowing watercourse, or 200 feet of any other significant watercourse or lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark). - Topographic map; Visual inspection (certification) of the proposed site	<input type="checkbox"/> Yes <input type="checkbox"/> 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	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> 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	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> 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	<input type="checkbox"/> Yes <input type="checkbox"/> 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	<input type="checkbox"/> Yes <input type="checkbox"/> No
Within 500 feet of a wetland. - US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site	<input type="checkbox"/> Yes <input type="checkbox"/> No
Within the area overlying a subsurface mine. - Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division	<input type="checkbox"/> Yes <input type="checkbox"/> No
Within an unstable area. - Engineering measures incorporated into the design; NM Bureau of Geology & Mineral Resources; USGS; NM Geological Society; Topographic map	<input type="checkbox"/> Yes <input type="checkbox"/> No
Within a 100-year floodplain. - FEMA map	<input type="checkbox"/> Yes <input type="checkbox"/> No

11.

Temporary Pits, Emergency Pits, and Below-grade Tanks 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.

- ☐ Hydrogeologic Report (Below-grade Tanks) - based upon the requirements of Paragraph (4) of Subsection B of 19.15.17.9 NMAC
- ☐ Hydrogeologic Data (Temporary and Emergency Pits) - based upon the requirements of Paragraph (2) of Subsection B of 19.15.17.9 NMAC
- ☐ 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 (Please complete Boxes 14 through 18, if applicable) - 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: _____

12.

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.

- ☐ Geologic and Hydrogeologic Data (only for on-site closure) - based upon the requirements of Paragraph (3) of Subsection B of 19.15.17.9
- ☐ Siting Criteria Compliance Demonstrations (only for on-site closure) - 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 (Please complete Boxes 14 through 18, if applicable) - 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: _____
- ☐ Previously Approved Operating and Maintenance Plan API Number: _____ (Applies only to closed-loop system that use above ground steel tanks or haul-off bins and propose to implement waste removal for closure)

13.

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 documents are attached.

- ☐ Hydrogeologic Report - based upon the requirements of Paragraph (1) of Subsection B of 19.15.17.9 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
- ☐ Quality 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 H₂S, 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

14.

Proposed Closure: 19.15.17.13 NMAC**Instructions:** Please complete the applicable boxes, Boxes 14 through 18, in regards to the proposed closure plan.

- Type: ☐ Drilling ☐ Workover ☐ Emergency ☐ Cavitation ☐ P&A ☐ Permanent Pit ☐ Below-grade Tank ☐ Closed-loop System
- ☐ Alternative
- Proposed Closure Method: ☐ Waste Excavation and Removal
- ☐ Waste Removal (Closed-loop systems only)
- ☐ 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 consideration)

15.

Waste Excavation and Removal Closure Plan Checklist: (19.15.17.13 NMAC) **Instructions:** Each of the following items must be attached to the 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 drill cuttings)
- ☐ 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

16.

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 identify 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: _____ Disposal Facility Permit Number: _____

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

17.

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.

- NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells

☐ Yes ☐ No☐ NA

Ground water is between 50 and 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☐ NA

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☐ NA

Within 300 feet of a continuously flowing watercourse, or 200 feet of any other significant watercourse or 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.

- Visual inspection (certification) of the proposed site; Aerial photo; Satellite image

☐ Yes ☐ No

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; 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

18.

On-Site Closure Plan Checklist: (19.15.17.13 NMAC) Instructions: Each of the following items must be attached to the closure plan. Please indicate, by a check mark in the box, that the documents are attached.☐ Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC☐ Proof of Surface Owner Notice - based upon the appropriate requirements of Subsection F of 19.15.17.13 NMAC☐ Construction/Design Plan of Burial Trench (if applicable) based upon the appropriate requirements of 19.15.17.11 NMAC☐ Construction/Design Plan of Temporary Pit (for in-place burial of a drying pad) - based upon the appropriate requirements of 19.15.17.11 NMAC☐ 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☐ Waste Material Sampling Plan - 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 drill cuttings or in case on-site closure standards cannot be achieved)☐ Soil Cover Design - 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

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): _____ Title: _____

Signature: _____ Date: _____

e-mail address: _____ Telephone: _____

20.

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

OCD Representative Signature: _____ Approval Date: _____

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: 1-16-2009

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): Rick Rickman Title: HSE Specialist

Signature:  Date: 1-28-09

e-mail address: rdrickman@forestoil.com Telephone: 575-392-9797

Accepted for record
NMOCD

FEB 03 2009

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

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

Form C-141
Revised October 10, 2003

Submit 2 Copies to appropriate
District Office in accordance
with Rule 116 on back
side of form

Release Notification and Corrective Action

OPERATOR

☒ Initial Report ☒ Final Report

Name of Company – Forest Oil	Contact – Rick Rickman
Address – 3504 NW County Rd Hobbs, NM 88240	Telephone No. – 575-392-9797
Facility Name – Skelly Unit #89	Facility Type – Workover Pit

Surface Owner - State	Mineral Owner - State	Lease No. API # 30-015-05429
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LOCATION OF RELEASE

Unit Letter B	Section 28	Township 17S	Range 31E	Feet from the	North/South Line	Feet from the	East/West Line	County Eddy County
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Latitude 32° 48.666' N Longitude 103° 52.356' W

NATURE OF RELEASE

Type of Release – Drilling Fluids	Volume of Release - Unknown	Volume Recovered – Unknown
Source of Release – Workover Pit	Date and Hour of Occurrence - ?	Date and Hour of Discovery – 12-24-08
Was Immediate Notice Given? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Required	If YES, To Whom?	
By Whom?	Date and Hour	
Was a Watercourse Reached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If YES, Volume Impacting the Watercourse.	

If a Watercourse was Impacted, Describe Fully.*

Describe Cause of Problem and Remedial Action Taken.* After drilling contents and liner were hauled to Disposal. Bottoms and walls were tested and were above the RAL's for the site.

Describe Area Affected and Cleanup Action Taken.* The site was delineated vertically and horizontally to the RAL's of the pit closure plan. All impacted soil above the RAL's were hauled to the Disposal and clean native soil was backfilled into the excavation. A plat map, field analytical, lab confirmations and disposal manifests are attached.

I hereby certify that the information given above is true and complete to the best of my knowledge and understand that pursuant to NMOCD rules and regulations all operators are required to report and/or file certain release notifications and perform corrective actions for releases which may endanger public health or the environment. The acceptance of a C-141 report by the NMOCD marked as "Final Report" does not relieve the operator of liability should their operations have failed to adequately investigate and remediate contamination that pose a threat to ground water, surface water, human health or the environment. In addition, NMOCD acceptance of a C-141 report does not relieve the operator of responsibility for compliance with any other federal, state, or local laws and/or regulations.

Signature: <i>Rick</i>	OIL CONSERVATION DIVISION	
Printed Name: Rick Rickman	Approved by District Supervisor: <i>M. L. Brannon</i>	
Title: HSE Specialist	Approval Date: FEB 03 2009	Expiration Date: <i>N/A</i>
E-mail Address: rdrickman@forestoil.com	Conditions of Approval: <i>N/A</i>	Attached <input type="checkbox"/>
Date: <i>1-28-09</i> Phone: 575-392-9797		

* Attach Additional Sheets If Necessary

Forest Oil Corporation

3504 NW County RD
Hobbs, NM 88240

FEB - 2 2009

Closure Report

Skelly Unit #89

Eddy County, NM

Prepared by

Elke Environmental, Inc.

P O Box 14167 Odessa, TX 79768
Ph 432-366-0043 Fax 432-366-0884

Elke Environmental, Inc.

P.O. Box 14167 Odessa, TX 79768
Phone (432) 366-0043 Fax (432) 366-0884

January 21, 2009

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

Re: Closure Report for Forest Oil – Skelly Unit #89

Mr. Bratcher,

The enclosed closure report is for the waste excavation and removal of the workover pit. All excess fluids were removed and disposed at a division-approved facility. The drilling mud and liner were excavated and hauled to Lea Land, Inc. (Permit # WM-1-035). After all drilling mud and liner was removed, the pit bottoms and walls were sampled for TPH, total BTEX, Benzene, Chlorides and the DRO and GRO combined fractions. The sample points that exceeded the levels of the closure plan were delineated to the standards in the closure plan and the impacted material was excavated and hauled to the disposal. The levels in the closure plan were 0.2 mg/kg of Benzene, 50 mg/kg of total BTEX, 2,500 mg/kg of TPH, 500 mg/kg of combined fraction GRO/DRO, 1,000 mg/kg of Chlorides. A C-141 is attached.

After the impacted material was excavated and removed the site was backfilled with clean native soil and a minimum of 1' of topsoil was placed on the site to promote revegetation. The site was reseeded with BLM Seed Mixture #3. If there are any questions about this report please call the office.

Thanks,



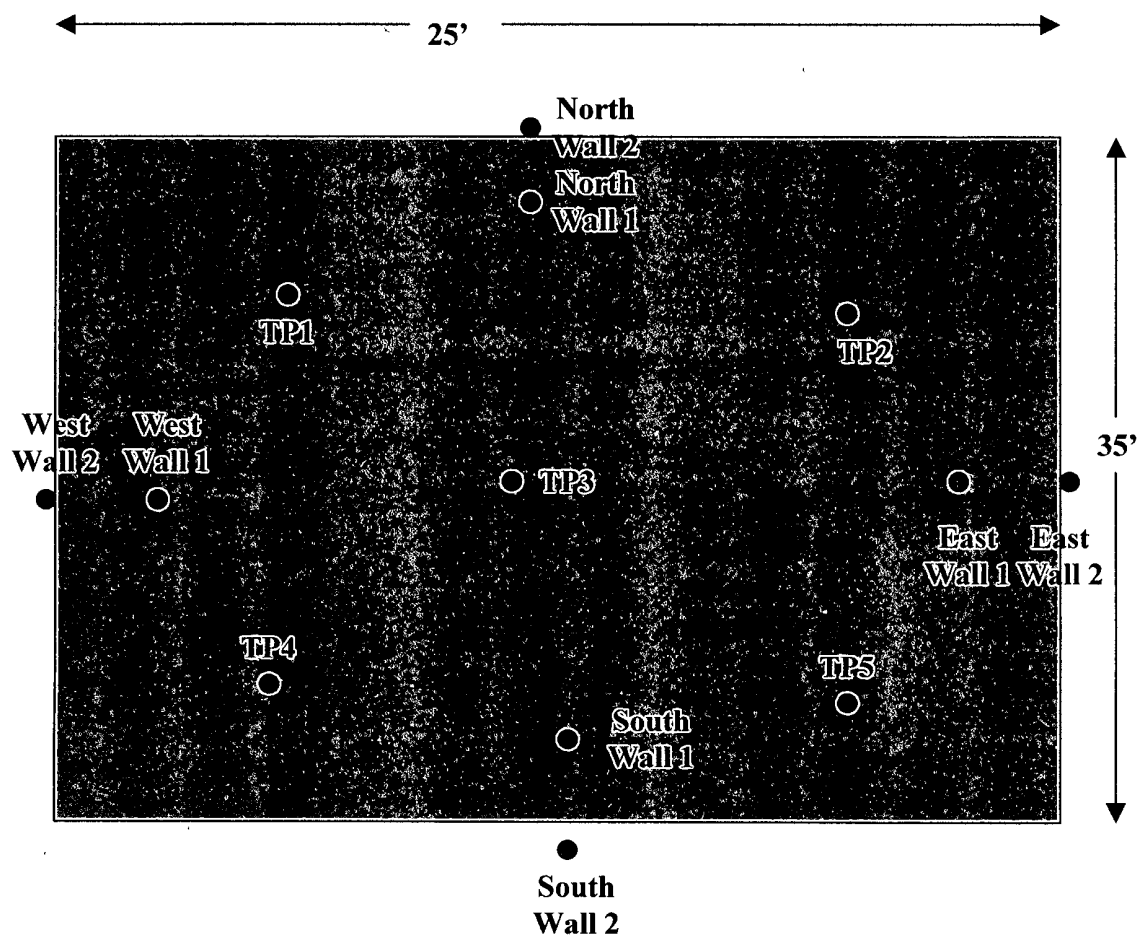
Curtis Elam

Attachment A

Plat Map, Field Analytical and Pictures

Forest Oil Corporation
Skelly Unit #89

Plat Map



Elke Environmental, Inc.

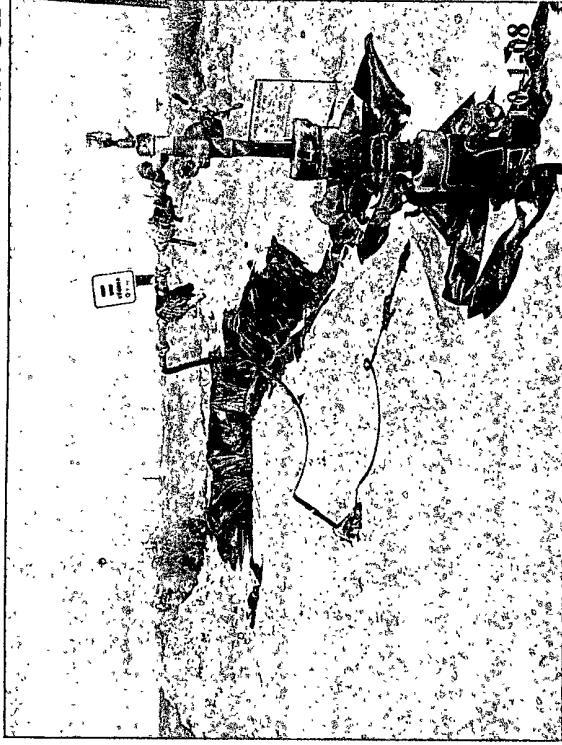
P.O. Box 14167 Odessa, TX 79768

Field Analytical Report FormClient Forest Oil Analyst Curtis ElamSite Skelly Unit #89

Sample ID	Date	Depth	TPH / PPM	CI / PPM	PID / PPM	GPS
Bottom Composite	12-24-08	6'		2,012		
TP1	1-7-09	8'		325		32° 48.666' N 103° 52.356' W
TP2	1-7-09	8'		562		32° 48.665' N 103° 52.353' W
TP3	1-7-09	8'		473		32° 48.664' N 103° 52.354' W
TP4	1-7-09	8'		533		32° 48.662' N 103° 52.352' W
TP5	1-7-09	8'		602		32° 48.662' N 103° 52.356' W
South Wall 1	12-24-08	2'		1,301		32° 48.661' N 103° 52.354' W
South Wall 2	1-7-09	2'		612		32° 48.660' N 103° 52.354' W
West Wall 1	12-24-08	2'		1,265		32° 48.663' N 103° 52.358' W
West Wall 2	1-7-09	2'		330		32° 48.663' N 103° 52.359' W
North Wall 1	12-24-08	2'		1,452		32° 48.666' N 103° 52.353' W
North Wall 2	1-7-09	2'		357		32° 48.667' N 103° 52.353' W
East Wall 1	12-24-08	2'		2,620		32° 48.663' N 103° 52.352' W
East Wall 2	1-7-09	2'		498		32° 48.663' N 103° 52.351' W

Analyst Notes _____

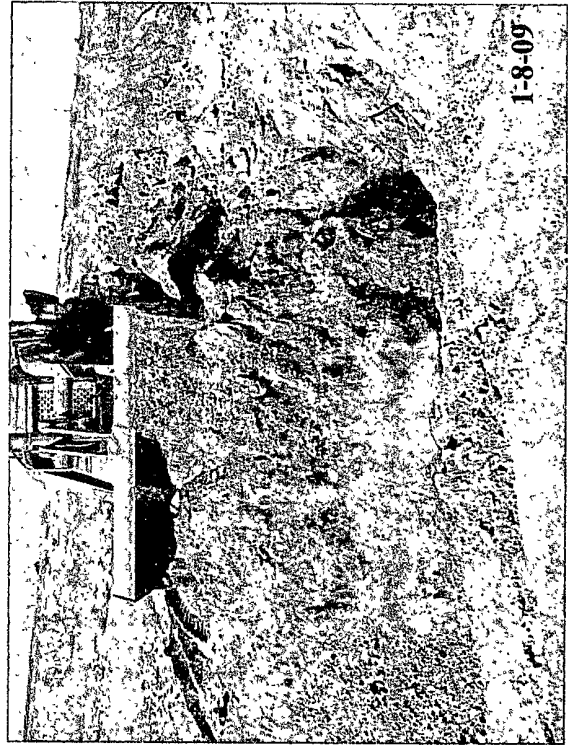
Forest Oil – Skelly Unit #89



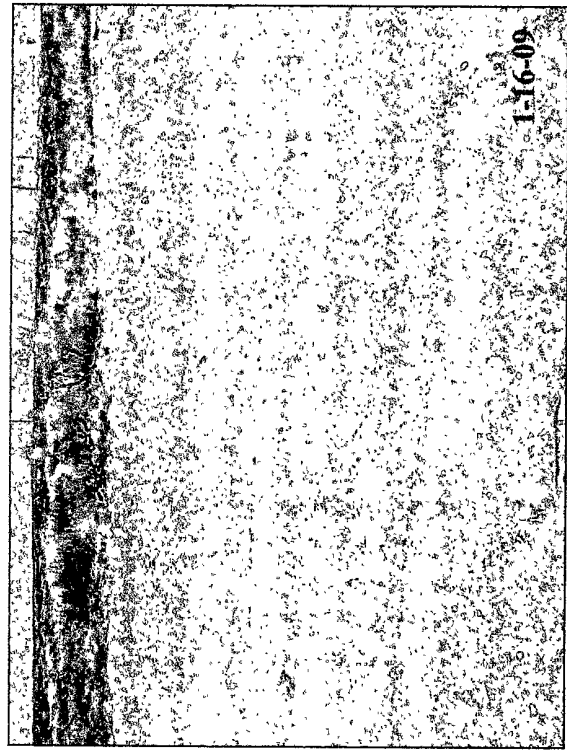
Workover pit before closure.



After excavation of impacted soils and hauled to disposal.



Backfilling clean native soil into excavation.



After seeding site with BLM Seed Mixture #3.

Attachment B

Lab Reports

Analytical Report 321911

for

Elke Environmental, Inc.

Project Manager: Logan Anderson

Forrest

20-JAN-09



12600 West I-20 East Odessa, Texas 79765

Texas certification numbers:

Houston, TX T104704215-08B-TX - Odessa/Midland, TX T104704400-08-TX

Florida certification numbers:

**Houston, TX E871002 - Miami, FL E86678 - Tampa, FL E86675
Norcross(Atlanta), GA E87429**

South Carolina certification numbers:

Norcross(Atlanta), GA 98015

North Carolina certification numbers:

Norcross(Atlanta), GA 483

**Houston - Dallas - San Antonio - Tampa - Miami - Latin America
Midland - Corpus Christi - Atlanta**



20-JAN-09

Project Manager: **Logan Anderson**
Elke Environmental, Inc.
4817 Andrews Hwy
P.O. Box 14167 Odessa, tx 79768
Odessa, TX 79762

Reference: XENCO Report No: **321911**
Forrest
Project Address: Skelly 89

Logan Anderson:

We are reporting to you the results of the analyses performed on the samples received under the project name referenced above and identified with the XENCO Report Number 321911. All results being reported under this Report Number apply to the samples analyzed and properly identified with a Laboratory ID number. Subcontracted analyses are identified in this report with either the NELAC certification number of the subcontract lab in the analyst ID field, or the complete subcontracted report attached to this report.

Unless otherwise noted in a Case Narrative, all data reported in this Analytical Report are in compliance with NELAC standards. Estimation of data uncertainty for this report is found in the quality control section of this report unless otherwise noted. Should insufficient sample be provided to the laboratory to meet the method and NELAC Matrix Duplicate and Matrix Spike requirements, then the data will be analyzed, evaluated and reported using all other available quality control measures.

The validity and integrity of this report will remain intact as long as it is accompanied by this letter and reproduced in full, unless written approval is granted by XENCO Laboratories. This report will be filed for at least 5 years in our archives after which time it will be destroyed without further notice, unless otherwise arranged with you. The samples received, and described as recorded in Report No. 321911 will be filed for 60 days, and after that time they will be properly disposed without further notice, unless otherwise arranged with you. We reserve the right to return to you any unused samples, extracts or solutions related to them if we consider so necessary (e.g., samples identified as hazardous waste, sample sizes exceeding analytical standard practices, controlled substances under regulated protocols, etc).

We thank you for selecting XENCO Laboratories to serve your analytical needs. If you have any questions concerning this report, please feel free to contact us at any time.

Respectfully,

Brent Barron, II

Odessa Laboratory Manager

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Sample Cross Reference 321911



Elke Environmental, Inc., Odessa, TX

Forrest

Sample Id	Matrix	Date Collected	Sample Depth	Lab Sample Id
TP1 @ 8'	S	Jan-07-09 10:15	8 ft	321911-001
TP2 @ 8'	S	Jan-07-09 10:00	8 ft	321911-002
TP3 @ 8'	S	Jan-07-09 09:00	8 ft	321911-003
TP4 @ 8'	S	Jan-07-09 09:15	8 ft	321911-004
TP5 @ 8'	S	Jan-07-09 08:30	8 ft	321911-005



Certificate of Analysis Summary 321911

Elke Environmental, Inc., Odessa, TX

Project Name: Forrest



Project Id:

Contact: Logan Anderson

Project Location: Skelly 89

Date Received in Lab: Wed Jan-07-09 04:20 pm


Report Date: 20-JAN-09

Project Manager: Brent Barron, II

Analysis Requested	Lab Id:	321911-001	321911-002	321911-003	321911-004	321911-005	
	Field Id:	TP1 @ 8'	TP2 @ 8'	TP3 @ 8'	TP4 @ 8'	TP5 @ 8'	
	Depth:	8 ft	8 ft	8 ft	8 ft	8 ft	
	Matrix:	SOIL	SOIL	SOIL	SOIL	SOIL	
	Sampled:	Jan-07-09 10:15	Jan-07-09 10:00	Jan-07-09 09:00	Jan-07-09 09:15	Jan-07-09 08:30	
Anions by EPA 300	Extracted:						
	Analyzed:	Jan-08-09 14:29	Jan-08-09 14:29	Jan-08-09 14:29	Jan-08-09 14:29	Jan-08-09 14:29	
	Units/RL:	mg/kg RL	mg/kg RL	mg/kg RL	mg/kg RL	mg/kg RL	
Chloride		309 10.0	317 10.0	314 10.0	302 10.0	281 10.0	
BTEX by EPA 8021B	Extracted:	Jan-09-09 12:15	Jan-09-09 12:15	Jan-09-09 12:15	Jan-09-09 12:15	Jan-09-09 12:15	
	Analyzed:	Jan-11-09 04:05	Jan-11-09 04:26	Jan-11-09 04:46	Jan-11-09 05:07	Jan-11-09 05:28	
	Units/RL:	mg/kg RL	mg/kg RL	mg/kg RL	mg/kg RL	mg/kg RL	
Benzene		ND 0.0010	ND 0.0010	ND 0.0010	ND 0.0010	ND 0.0010	
Toluene		ND 0.0020	ND 0.0020	ND 0.0020	ND 0.0020	ND 0.0020	
Ethylbenzene		ND 0.0010	ND 0.0010	ND 0.0010	ND 0.0010	ND 0.0010	
m,p-Xylenes		ND 0.0020	ND 0.0020	ND 0.0020	ND 0.0020	ND 0.0020	
o-Xylene		ND 0.0010	ND 0.0010	ND 0.0010	ND 0.0010	ND 0.0010	
Total Xylenes		ND 0.0020	ND 0.0020	ND 0.0020	ND 0.0020	ND 0.0020	
Total BTEX		ND 0.0010	ND 0.0010	ND 0.0010	ND 0.0010	ND 0.0010	
Percent Moisture	Extracted:						
	Analyzed:	Jan-08-09 17:00	Jan-08-09 17:00	Jan-08-09 17:00	Jan-08-09 17:00	Jan-08-09 17:00	
	Units/RL:	% RL	% RL	% RL	% RL	% RL	
Percent Moisture		2.12 1.00	2.08 1.00	1.99 1.00	1.17 1.00	2.24 1.00	
TPH By SW8015 Mod	Extracted:	Jan-08-09 09:30	Jan-08-09 09:30	Jan-08-09 09:30	Jan-08-09 09:30	Jan-08-09 09:30	
	Analyzed:	Jan-08-09 16:01	Jan-08-09 16:26	Jan-08-09 16:51	Jan-08-09 17:39	Jan-08-09 18:04	
	Units/RL:	mg/kg RL	mg/kg RL	mg/kg RL	mg/kg RL	mg/kg RL	
C6-C12 Gasoline Range Hydrocarbons		ND 15.3	ND 15.3	ND 15.3	ND 15.2	ND 15.3	
C12-C28 Diesel Range Hydrocarbons		23.1 15.3	ND 15.3	ND 15.3	ND 15.2	ND 15.3	
C28-C35 Oil Range Hydrocarbons		ND 15.3	ND 15.3	ND 15.3	ND 15.2	ND 15.3	
Total TPH		23.1 15.3	ND 15.3	ND 15.3	ND 15.2	ND 15.3	

This analytical report, and the entire data package it represents, has been made for your exclusive and confidential use. The interpretations and results expressed throughout this analytical report represent the best judgment of XENCO Laboratories. XENCO Laboratories assumes no responsibility and makes no warranty to the end use of the data hereby presented. Our liability is limited to the amount invoiced for this work order unless otherwise agreed to in writing.

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Brent Barron
Odessa Laboratory Director



Certificate of Analysis Summary 321911

Elke Environmental, Inc., Odessa, TX

Project Name: Forrest



Project Id:

Contact: Logan Anderson

Project Location: Skelly 89

Date Received in Lab: Wed Jan-07-09 04:20 pm


Report Date: 20-JAN-09

Project Manager: Brent Barron, II

Analysis Requested	Lab Id:	321911-001	321911-002	321911-003	321911-004	321911-005	
	Field Id:	TP1 @ 8'	TP2 @ 8'	TP3 @ 8'	TP4 @ 8'	TP5 @ 8'	
	Depth:	8 ft	8 ft	8 ft	8 ft	8 ft	
	Matrix:	SOIL	SOIL	SOIL	SOIL	SOIL	
	Sampled:	Jan-07-09 10:15	Jan-07-09 10:00	Jan-07-09 09:00	Jan-07-09 09:15	Jan-07-09 08:30	
TPH by EPA 418.1	Extracted:						
	Analyzed:	Jan-19-09 15:08	Jan-19-09 15:08	Jan-19-09 15:08	Jan-19-09 15:08	Jan-19-09 15:08	
	Units/RL:	mg/kg RL	mg/kg RL	mg/kg RL	mg/kg RL	mg/kg RL	
TPH, Total Petroleum Hydrocarbons		ND 10.2	ND 10.2	ND 10.2	ND 10.1	ND 10.2	

This analytical report, and the entire data package it represents, has been made for your exclusive and confidential use. The interpretations and results expressed throughout this analytical report represent the best judgment of XENCO Laboratories. XENCO Laboratories assumes no responsibility and makes no warranty to the end use of the data hereby presented. Our liability is limited to the amount invoiced for this work order unless otherwise agreed to in writing.

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Brent Barron
Odessa Laboratory Director

- X** In our quality control review of the data a QC deficiency was observed and flagged as noted. MS/MSD recoveries were found to be outside of the laboratory control limits due to possible matrix /chemical interference, or a concentration of target analyte high enough to effect the recovery of the spike concentration. This condition could also effect the relative percent difference in the MS/MSD.
- B** A target analyte or common laboratory contaminant was identified in the method blank. Its presence indicates possible field or laboratory contamination.
- D** The sample(s) were diluted due to targets detected over the highest point of the calibration curve, or due to matrix interference. Dilution factors are included in the final results. The result is from a diluted sample.
- E** The data exceeds the upper calibration limit; therefore, the concentration is reported as estimated.
- F** RPD exceeded lab control limits.
- J** The target analyte was positively identified below the MQL and above the SQL.
- U** Analyte was not detected.
- L** The LCS data for this analytical batch was reported below the laboratory control limits for this analyte. The department supervisor and QA Director reviewed data. The samples were either reanalyzed or flagged as estimated concentrations.
- H** The LCS data for this analytical batch was reported above the laboratory control limits. Supporting QC Data were reviewed by the Department Supervisor and QA Director. Data were determined to be valid for reporting.
- K** Sample analyzed outside of recommended hold time.
- JN** A combination of the "N" and the "J" qualifier. The analysis indicates that the analyte is "tentatively identified" and the associated numerical value may not be consistent with the amount actually present in the environmental sample.

* Outside XENCO's scope of NELAC Accreditation.

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 2505 North Falkenburg Rd, Tampa, FL 33619
 5757 NW 158th St, Miami Lakes, FL 33014
 12600 West I-20 East, Odessa, TX 79765
 842 Cantwell Lane, Corpus Christi, TX 78408

Phone	Fax
(281) 240-4200	(281) 240-4280
(214) 902 0300	(214) 351-9139
(210) 509-3334	(210) 509-3335
(813) 620-2000	(813) 620-2033
(305) 823-8500	(305) 823-8555
(432) 563-1800	(432) 563-1713
(361) 884-0371	(361) 884-9116



Form 2 - Surrogate Recoveries

Project Name: Forrest

Work Orders : 321911,

Project ID:

Lab Batch #: 746155

Sample: 321906-001 S / MS

Batch: 1 Matrix: Soil

Units: mg/kg

SURROGATE RECOVERY STUDY					
BTEX by EPA 8021B	Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
Analytes					
1,4-Difluorobenzene	0.0274	0.0300	91	80-120	
4-Bromofluorobenzene	0.0262	0.0300	87	80-120	

Lab Batch #: 746155

Sample: 321906-001 SD / MSD

Batch: 1 Matrix: Soil

Units: mg/kg

SURROGATE RECOVERY STUDY					
BTEX by EPA 8021B	Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
Analytes					
1,4-Difluorobenzene	0.0264	0.0300	88	80-120	
4-Bromofluorobenzene	0.0264	0.0300	88	80-120	

Lab Batch #: 746155

Sample: 321911-001 / SMP

Batch: 1 Matrix: Soil

Units: mg/kg

SURROGATE RECOVERY STUDY					
BTEX by EPA 8021B	Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
Analytes					
1,4-Difluorobenzene	0.0307	0.0300	102	80-120	
4-Bromofluorobenzene	0.0306	0.0300	102	80-120	

Lab Batch #: 746155

Sample: 321911-002 / SMP

Batch: 1 Matrix: Soil

Units: mg/kg

SURROGATE RECOVERY STUDY					
BTEX by EPA 8021B	Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
Analytes					
1,4-Difluorobenzene	0.0306	0.0300	102	80-120	
4-Bromofluorobenzene	0.0304	0.0300	101	80-120	

Lab Batch #: 746155

Sample: 321911-003 / SMP

Batch: 1 Matrix: Soil

Units: mg/kg

SURROGATE RECOVERY STUDY					
BTEX by EPA 8021B	Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
Analytes					
1,4-Difluorobenzene	0.0308	0.0300	103	80-120	
4-Bromofluorobenzene	0.0301	0.0300	100	80-120	

** Surrogates outside limits; data and surrogates confirmed by reanalysis

*** Poor recoveries due to dilution

Surrogate Recovery [D] = $100 * A / B$

All results are based on MDL and validated for QC purposes.



Form 2 - Surrogate Recoveries

Project Name: Forrest

Work Orders : 321911,

Project ID:

Lab Batch #: 746155

Sample: 321911-004 / SMP

Batch: 1 Matrix: Soil

Units: mg/kg

SURROGATE RECOVERY STUDY

BTEX by EPA 8021B Analytes	Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
1,4-Difluorobenzene	0.0306	0.0300	102	80-120	
4-Bromofluorobenzene	0.0302	0.0300	101	80-120	

Lab Batch #: 746155

Sample: 321911-005 / SMP

Batch: 1 Matrix: Soil

Units: mg/kg

SURROGATE RECOVERY STUDY

BTEX by EPA 8021B Analytes	Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
1,4-Difluorobenzene	0.0307	0.0300	102	80-120	
4-Bromofluorobenzene	0.0294	0.0300	98	80-120	

Lab Batch #: 746155

Sample: 522716-1-BKS / BKS

Batch: 1 Matrix: Solid

Units: mg/kg

SURROGATE RECOVERY STUDY

BTEX by EPA 8021B Analytes	Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
1,4-Difluorobenzene	0.0274	0.0300	91	80-120	
4-Bromofluorobenzene	0.0285	0.0300	95	80-120	

Lab Batch #: 746155

Sample: 522716-1-BLK / BLK

Batch: 1 Matrix: Solid

Units: mg/kg

SURROGATE RECOVERY STUDY

BTEX by EPA 8021B Analytes	Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
1,4-Difluorobenzene	0.0311	0.0300	104	80-120	
4-Bromofluorobenzene	0.0314	0.0300	105	80-120	

Lab Batch #: 746155

Sample: 522716-1-BSD / BSD

Batch: 1 Matrix: Solid

Units: mg/kg

SURROGATE RECOVERY STUDY

BTEX by EPA 8021B Analytes	Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
1,4-Difluorobenzene	0.0269	0.0300	90	80-120	
4-Bromofluorobenzene	0.0284	0.0300	95	80-120	

** Surrogates outside limits; data and surrogates confirmed by reanalysis

*** Poor recoveries due to dilution

Surrogate Recovery [D] = $100 * A / B$

All results are based on MDL and validated for QC purposes.



Form 2 - Surrogate Recoveries

Project Name: Forrest

Work Orders : 321911,

Project ID:

Lab Batch #: 745966

Sample: 321755-015 S / MS

Batch: 1 Matrix: Soil

Units: mg/kg

SURROGATE RECOVERY STUDY					
TPH By SW8015 Mod	Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
Analytes					
1-Chlorooctane	99.5	100	100	70-135	
o-Terphenyl	39.8	50.0	80	70-135	

Lab Batch #: 745966

Sample: 321755-015 SD / MSD

Batch: 1 Matrix: Soil

Units: mg/kg

SURROGATE RECOVERY STUDY					
TPH By SW8015 Mod	Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
Analytes					
1-Chlorooctane	101	100	101	70-135	
o-Terphenyl	40.6	50.0	81	70-135	

Lab Batch #: 745966

Sample: 321911-001 / SMP

Batch: 1 Matrix: Soil

Units: mg/kg

SURROGATE RECOVERY STUDY					
TPH By SW8015 Mod	Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
Analytes					
1-Chlorooctane	94.5	100	95	70-135	
o-Terphenyl	50.6	50.0	101	70-135	

Lab Batch #: 745966

Sample: 321911-002 / SMP

Batch: 1 Matrix: Soil

Units: mg/kg

SURROGATE RECOVERY STUDY					
TPH By SW8015 Mod	Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
Analytes					
1-Chlorooctane	96.2	100	96	70-135	
o-Terphenyl	51.3	50.0	103	70-135	

Lab Batch #: 745966

Sample: 321911-003 / SMP

Batch: 1 Matrix: Soil

Units: mg/kg

SURROGATE RECOVERY STUDY					
TPH By SW8015 Mod	Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
Analytes					
1-Chlorooctane	96.0	100	96	70-135	
o-Terphenyl	51.3	50.0	103	70-135	

** Surrogates outside limits; data and surrogates confirmed by reanalysis

*** Poor recoveries due to dilution

Surrogate Recovery [D] = $100 * A / B$

All results are based on MDL and validated for QC purposes.



Form 2 - Surrogate Recoveries

Project Name: Forrest

Work Orders : 321911,

Project ID:

Lab Batch #: 745966

Sample: 321911-004 / SMP

Batch: 1 Matrix: Soil

Units: mg/kg

SURROGATE RECOVERY STUDY

TPH By SW8015 Mod Analytes	Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
1-Chlorooctane	93.2	100	93	70-135	
o-Terphenyl	48.6	50.0	97	70-135	

Lab Batch #: 745966

Sample: 321911-005 / SMP

Batch: 1 Matrix: Soil

Units: mg/kg

SURROGATE RECOVERY STUDY

TPH By SW8015 Mod Analytes	Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
1-Chlorooctane	94.5	100	95	70-135	
o-Terphenyl	50.2	50.0	100	70-135	

Lab Batch #: 745966

Sample: 522620-1-BKS / BKS

Batch: 1 Matrix: Solid

Units: mg/kg

SURROGATE RECOVERY STUDY

TPH By SW8015 Mod Analytes	Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
1-Chlorooctane	104	100	104	70-135	
o-Terphenyl	43.7	50.0	87	70-135	

Lab Batch #: 745966

Sample: 522620-1-BLK / BLK

Batch: 1 Matrix: Solid

Units: mg/kg

SURROGATE RECOVERY STUDY

TPH By SW8015 Mod Analytes	Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
1-Chlorooctane	89.1	100	89	70-135	
o-Terphenyl	49.1	50.0	98	70-135	

Lab Batch #: 745966

Sample: 522620-1-BSD / BSD

Batch: 1 Matrix: Solid

Units: mg/kg

SURROGATE RECOVERY STUDY

TPH By SW8015 Mod Analytes	Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
1-Chlorooctane	106	100	106	70-135	
o-Terphenyl	44.9	50.0	90	70-135	

** Surrogates outside limits; data and surrogates confirmed by reanalysis

*** Poor recoveries due to dilution

Surrogate Recovery [D] = $100 * A / B$

All results are based on MDL and validated for QC purposes.

Project Name: Forrest

Work Order #: 321911

Project ID:

Lab Batch #: 745936

Sample: 745936-1-BKS

Matrix: Solid

Date Analyzed: 01/08/2009

Date Prepared: 01/08/2009

Analyst: LATCOR

Reporting Units: mg/kg

Batch #: 1

BLANK /BLANK SPIKE RECOVERY STUDY

Anions by EPA 300		Blank Result [A]	Spike Added [B]	Blank Spike Result [C]	Blank Spike %R [D]	Control Limits %R	Flags
Analytes							
Chloride		ND	10.0	9.51	95	90-110	

Blank Spike Recovery [D] = $100 * [C] / [B]$

All results are based on MDL and validated for QC purposes.



BS / BSD Recoveries



Project Name: Forrest

Work Order #: 321911

Analyst: ASA

Date Prepared: 01/09/2009

Project ID:

Date Analyzed: 01/10/2009

Lab Batch ID: 746155

Sample: 522716-1-BKS

Batch #: 1

Matrix: Solid

Units: mg/kg

BLANK /BLANK SPIKE / BLANK SPIKE DUPLICATE RECOVERY STUDY

BTEX by EPA 8021B	Blank Sample Result [A]	Spike Added [B]	Blank Spike Result [C]	Blank Spike %R [D]	Spike Added [E]	Blank Spike Duplicate Result [F]	Blk. Spk Dup. %R [G]	RPD %	Control Limits %R	Control Limits %RPD	Flag
Analytes											
Benzene	ND	0.1000	0.1024	102	0.1	0.1048	105	2	70-130	35	
Toluene	ND	0.1000	0.0971	97	0.1	0.0993	99	2	70-130	35	
Ethylbenzene	ND	0.1000	0.0998	100	0.1	0.1020	102	2	71-129	35	
m,p-Xylenes	ND	0.2000	0.1949	97	0.2	0.1986	99	2	70-135	35	
o-Xylene	ND	0.1000	0.0955	96	0.1	0.0970	97	2	71-133	35	

Analyst: ASA

Date Prepared: 01/19/2009

Date Analyzed: 01/19/2009

Lab Batch ID: 746919

Sample: 746919-1-BKS

Batch #: 1

Matrix: Solid

Units: mg/kg

BLANK /BLANK SPIKE / BLANK SPIKE DUPLICATE RECOVERY STUDY

TPH by EPA 418.1	Blank Sample Result [A]	Spike Added [B]	Blank Spike Result [C]	Blank Spike %R [D]	Spike Added [E]	Blank Spike Duplicate Result [F]	Blk. Spk Dup. %R [G]	RPD %	Control Limits %R	Control Limits %RPD	Flag
Analytes											
TPH, Total Petroleum Hydrocarbons	ND	2500	2320	93	2500	2280	91	2	65-135	35	

Relative Percent Difference RPD = $200 * [(C-F)/(C+F)]$

Blank Spike Recovery [D] = $100 * (C)/[B]$

Blank Spike Duplicate Recovery [G] = $100 * (F)/[E]$

All results are based on MDL and Validated for QC Purposes



BS / BSD Recoveries



Project Name: Forrest

Work Order #: 321911

Analyst: BHW

Date Prepared: 01/08/2009

Project ID:

Date Analyzed: 01/08/2009

Lab Batch ID: 745966

Sample: 522620-1-BKS

Batch #: 1

Matrix: Solid

Units: mg/kg

BLANK /BLANK SPIKE / BLANK SPIKE DUPLICATE RECOVERY STUDY

TPH By SW8015 Mod	Blank Sample Result [A]	Spike Added [B]	Blank Spike Result [C]	Blank Spike %R [D]	Spike Added [E]	Blank Spike Duplicate Result [F]	Blk. Spk Dup. %R [G]	RPD %	Control Limits %R	Control Limits %RPD	Flag
Analytes											
C6-C12 Gasoline Range Hydrocarbons	ND	1000	1060	106	1000	1060	106	0	70-135	35	
C12-C28 Diesel Range Hydrocarbons	ND	1000	1010	101	1000	1020	102	1	70-135	35	

Relative Percent Difference RPD = $200 * |(C-F)/(C+F)|$

Blank Spike Recovery [D] = $100 * (C)/[B]$

Blank Spike Duplicate Recovery [G] = $100 * (F)/[E]$

All results are based on MDL and Validated for QC Purposes



Form 3 - MS Recoveries



Project Name: Forrest

Work Order #: 321911

Lab Batch #: 745936

Date Analyzed: 01/08/2009

Date Prepared: 01/08/2009

Project ID:

Analyst: LATCOR

QC- Sample ID: 321906-001 S

Batch #: 1

Matrix: Soil

Reporting Units: mg/kg

MATRIX / MATRIX SPIKE RECOVERY STUDY

Inorganic Anions by EPA 300 Analytes	Parent Sample Result [A]	Spike Added [B]	Spiked Sample Result [C]	%R [D]	Control Limits %R	Flag
Chloride	530	200	675	73	80-120	X

Matrix Spike Percent Recovery [D] = $100 \cdot (C-A)/B$

Relative Percent Difference [E] = $200 \cdot (C-A)/(C+B)$

All Results are based on MDL and Validated for QC Purposes



Form 3 - MS / MSD Recoveries



Project Name: Forrest

Work Order #: 321911

Project ID:

Lab Batch ID: 746155

QC- Sample ID: 321906-001 S

Batch #: 1 Matrix: Soil

Date Analyzed: 01/11/2009

Date Prepared: 01/09/2009

Analyst: ASA

Reporting Units: mg/kg

MATRIX SPIKE / MATRIX SPIKE DUPLICATE RECOVERY STUDY											
BTEX by EPA 8021B Analytes	Parent Sample Result [A]	Spike Added [B]	Spiked Sample Result [C]	Spiked Sample %R [D]	Spike Added [E]	Duplicate Spiked Sample Result [F]	Spiked Dup. %R [G]	RPD %	Control Limits %R	Control Limits %RPD	Flag
Benzene	ND	0.1101	0.0896	81	0.1101	0.1015	92	13	70-130	35	
Toluene	ND	0.1101	0.0843	77	0.1101	0.0943	86	11	70-130	35	
Ethylbenzene	ND	0.1101	0.0832	76	0.1101	0.0947	86	12	71-129	35	
m,p-Xylenes	ND	0.2201	0.1589	72	0.2201	0.1836	83	14	70-135	35	
o-Xylene	ND	0.1101	0.0778	71	0.1101	0.0890	81	13	71-133	35	

Lab Batch ID: 746919

QC- Sample ID: 321906-001 S

Batch #: 1 Matrix: Soil

Date Analyzed: 01/19/2009

Date Prepared: 01/19/2009

Analyst: ASA

Reporting Units: mg/kg

MATRIX SPIKE / MATRIX SPIKE DUPLICATE RECOVERY STUDY											
TPH by EPA 418.1 Analytes	Parent Sample Result [A]	Spike Added [B]	Spiked Sample Result [C]	Spiked Sample %R [D]	Spike Added [E]	Duplicate Spiked Sample Result [F]	Spiked Dup. %R [G]	RPD %	Control Limits %R	Control Limits %RPD	Flag
TPH, Total Petroleum Hydrocarbons	ND	2750	2540	92	2750	2650	96	4	65-135	35	

Lab Batch ID: 745966

QC- Sample ID: 321755-015 S

Batch #: 1 Matrix: Soil

Date Analyzed: 01/08/2009

Date Prepared: 01/08/2009

Analyst: BHW

Reporting Units: mg/kg

MATRIX SPIKE / MATRIX SPIKE DUPLICATE RECOVERY STUDY											
TPH By SW8015 Mod Analytes	Parent Sample Result [A]	Spike Added [B]	Spiked Sample Result [C]	Spiked Sample %R [D]	Spike Added [E]	Duplicate Spiked Sample Result [F]	Spiked Dup. %R [G]	RPD %	Control Limits %R	Control Limits %RPD	Flag
C6-C12 Gasoline Range Hydrocarbons	ND	1010	992	98	1010	1020	101	3	70-135	35	
C12-C28 Diesel Range Hydrocarbons	ND	1010	973	96	1010	1000	99	3	70-135	35	

Matrix Spike Percent Recovery $[D] = 100 \times (C-A)/B$
Relative Percent Difference $RPD = 200 \times |(C-F)/(C+F)|$

Matrix Spike Duplicate Percent Recovery $[G] = 100 \times (F-A)/E$

ND = Not Detected, J = Present Below Reporting Limit, B = Present in Blank, NR = Not Requested, I = Interference, NA = Not Applicable
N = See Narrative, EQL = Estimated Quantitation Limit



Sample Duplicate Recovery



Project Name: Forrest

Work Order #: 321911

Lab Batch #: 745936

Date Analyzed: 01/08/2009

QC- Sample ID: 321906-001 D

Reporting Units: mg/kg

Project ID:

Analyst: LATCOR

Date Prepared: 01/08/2009

Batch #: 1

Matrix: Soil

SAMPLE / SAMPLE DUPLICATE RECOVERY					
Anions by EPA 300	Parent Sample Result [A]	Sample Duplicate Result [B]	RPD	Control Limits %RPD	Flag
Analyte					
Chloride	530	533	1	20	

Lab Batch #: 745941

Date Analyzed: 01/08/2009

QC- Sample ID: 321906-001 D

Reporting Units: %

Date Prepared: 01/08/2009

Batch #: 1

Analyst: BEV

Matrix: Soil

SAMPLE / SAMPLE DUPLICATE RECOVERY					
Percent Moisture	Parent Sample Result [A]	Sample Duplicate Result [B]	RPD	Control Limits %RPD	Flag
Analyte					
Percent Moisture	9.15	8.91	3	20	

Spike Relative Difference RPD $200 * |(B-A)/(B+A)|$
All Results are based on MDL and validated for QC purposes.

A Xenco Laboratories Company

12600 West I-20 East
Odessa, Texas 79785

Phone: 432-583-1800
Fax: 432-583-1713

Project Name Forest

Project 8.

Project Loc: Skelly 89

PO #:

Fax No. 432-366-0884

Report Format: ☒ Standard ☐ TRRP ☐ NPDES

e-mail

[illegible]

Environmental Lab of Texas
Variance/ Corrective Action Report- Sample Log-In

Client: Elke EW.
Date/ Time: 1.7.09 16.20
Lab ID #: 321911
Initials: AL

Sample Receipt Checklist

				Client initials
#1	Temperature of container/ cooler?	Yes	No	3.5 °C
#2	Shipping container in good condition?	Yes	No	
#3	Custody Seals intact on shipping container/ cooler?	Yes	No	Not Present
#4	Custody Seals intact on sample bottles/ container?	Yes	No	Not Present
#5	Chain of Custody present?	Yes	No	
#6	Sample instructions complete of Chain of Custody?	Yes	No	
#7	Chain of Custody signed when relinquished/ received?	Yes	No	
#8	Chain of Custody agrees with sample label(s)?	Yes	No	ID written on Cont./ Lid
#9	Container label(s) legible and intact?	Yes	No	Not Applicable
#10	Sample matrix/ properties agree with Chain of Custody?	Yes	No	
#11	Containers supplied by ELOT?	Yes	No	
#12	Samples in proper container/ bottle?	Yes	No	See Below
#13	Samples properly preserved?	Yes	No	See Below
#14	Sample bottles intact?	Yes	No	
#15	Preservations documented on Chain of Custody?	Yes	No	
#16	Containers documented on Chain of Custody?	Yes	No	
#17	Sufficient sample amount for indicated test(s)?	Yes	No	See Below
#18	All samples received within sufficient hold time?	Yes	No	See Below
#19	Subcontract of sample(s)?	Yes	No	Not Applicable
#20	VOC samples have zero headspace?	Yes	No	Not Applicable

Variance Documentation

Contact _____ Contacted by: _____ Date/ Time: _____

Regarding: _____

Corrective Action Taken. _____

- Check all that Apply:
- ☐ See attached e-mail/ fax
 - ☐ Client understands and would like to proceed with analysis
 - ☐ Cooling process had begun shortly after sampling event

Attachment C

Disposal Manifests

LEA LAND DISPOSAL SITE NEW MEXICO

MILE MARKER #64 US HWY. 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257

BALTICAR

NON-HAZARDOUS WASTE MANIFEST		NO	066359	1. PAGE	OF	2. TRAILER NO.	7
G E N E R A T O R	3. COMPANY NAME Forest Oil Corporation PHONE NO. (505) 382-9707		4. ADDRESS 350 NW County Road CITY STATE ZIP Hobbs NM 88240		5. PICK-UP DATE # 1/5/2009		
	7. NAME OR DESCRIPTION OF WASTE SHIPPED: a. Non-Regulated, Non Hazardous Waste 344712		8. CONTAINERS No. Type 1 CM		9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #
	b.						
	c.						
	12. COMMENTS OR SPECIAL INSTRUCTIONS: Skelly Unit #89		13. WASTE PROFILE NO.				
T R A N S P O R T E R S	14. IN CASE OF EMERGENCY OR SPILL, CONTACT						
	NAME Kin Slaughter		PHONE NO. 575-887-4048		24-HOUR EMERGENCY NO.		
D I S P O S I T A T O R	15. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations, and are the same materials previously approved by LEA LAND, LLC						
	PRINTED/TYPED NAME		SIGNATURE			DATE	
D I S P O S I T A T O R	16. TRANSPORTER (1) NAME: ELK ENVIRONMENTAL TEXAS I.D. NO. IN CASE OF EMERGENCY CONTACT: EMERGENCY PHONE:		17. TRANSPORTER (2) NAME: TEXAS I.D. NO. IN CASE OF EMERGENCY CONTACT: EMERGENCY PHONE:				
	18. TRANSPORTER (1): Acknowledgment of receipt of material PRINTED/TYPED NAME SIGNATURE <i>Baltazar</i> DATE 1-8-09		19. TRANSPORTER (2): Acknowledgment of receipt of material PRINTED/TYPED NAME SIGNATURE DATE				
D I S P O S I T A T O R	Lea Land, LLC		ADDRESS: Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM		PHONE: 505-887-4048		
	PERMIT NO. WM-01-035 - New Mexico		20. COMMENTS				
D I S P O S I T A T O R	21. DISPOSAL FACILITY'S CERTIFICATION: I hereby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes.						
	AUTHORIZED SIGNATURE <i>Santos Cortivaros</i>		CELL NO. —		DATE 1-8-09		TIME 1100

GENERATOR: COPIES 1 & 6

DISPOSAL SITE: COPIES 2 & 3

TRANSPORTERS: COPIES 4 & 5

COPY 4

LEA LAND DISPOSAL SITE NEW MEXICO

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257

B+D

NON-HAZARDOUS WASTE MANIFEST

NO **066360**

1. PAGE OF

2. TRAILER NO. J-1

G	3. COMPANY NAME Forest Oil Corporation	4. ADDRESS 350 NW County Road		5. PICK-UP DATE 1/8/2009			
	PHONE NO. (505) 362-9797	CITY Hobbs	STATE NM	ZIP 88240	6. TNRCC I.D. NO.		
E	7. NAME OR DESCRIPTION OF WASTE SHIPPED:			8. CONTAINERS No. Type	9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #
N	a. Non-Regulated, Non-Hazardous Waste			1 CM			
E	b.						
R	c.						
A	12. COMMENTS OR SPECIAL INSTRUCTIONS: Shelly Unit #89			13. WASTE PROFILE NO.			
T	14. IN CASE OF EMERGENCY OR SPILL, CONTACT						
O	NAME Kim Slaughter		PHONE NO. 575-587-4048		24-HOUR EMERGENCY NO.		
R	15. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations, and are the same materials previously approved by LEA LAND, LLC						
	PRINTED/TYPED NAME			SIGNATURE		DATE	
T	16. TRANSPORTER (1)			17. TRANSPORTER (2)			
R	NAME: ELK ENVIRONMENTAL			NAME:			
A	TEXAS I.D. NO.			TEXAS I.D. NO.			
N	IN CASE OF EMERGENCY CONTACT:			IN CASE OF EMERGENCY CONTACT:			
S	EMERGENCY PHONE:			EMERGENCY PHONE:			
P	18. TRANSPORTER (1): Acknowledgment of receipt of material			19. TRANSPORTER (2): Acknowledgment of receipt of material			
O	PRINTED/TYPED NAME Jos. Bejarano			PRINTED/TYPED NAME			
R	SIGNATURE Jos. Bejarano DATE 1/8			SIGNATURE DATE			
D	Lea Land, LLC		ADDRESS: Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM		PHONE: 505-887-4048		
I	PERMIT NO. WM-01-035 - New Mexico		20. COMMENTS				
S	21. DISPOSAL FACILITY'S CERTIFICATION: I hereby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes.						
C	AUTHORIZED SIGNATURE [Signature]		CELL NO. —		DATE 1/8/09		TIME 1:00
P							
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S							
I							
T							
A							
R							
E							
N							
E							
G							

GENERATOR: COPIES 1 & 6

DISPOSAL SITE: COPIES 2 & 3

TRANSPORTERS: COPIES 4 & 5

CDV E

LEA LAND DISPOSAL SITE NEW MEXICO

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257

Solis & Sons
A-96

NON-HAZARDOUS WASTE MANIFEST		NO	066358		1. PAGE ___ OF ___	2. TRAILER NO. <i>A-96</i>		
G E N E R A T O R	3. COMPANY NAME Forest Oil Corporation PHONE NO. (505) 292-0707		4. ADDRESS 350 NW County Road CITY Hobbs STATE NM ZIP 89241			5. PICK-UP DATE 1/8/2009 6. TNRC I.D. NO.		
	7. NAME OR DESCRIPTION OF WASTE SHIPPED: a. Non-Regulated, Non Hazardous Waste ✓ b. c.				8. CONTAINERS No. 1 Type CM	9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #
	12. COMMENTS OR SPECIAL INSTRUCTIONS: Skelly Unit #89				13. WASTE PROFILE NO.			
	14. IN CASE OF EMERGENCY OR SPILL, CONTACT NAME: Kin Slaughter PHONE NO: 575-957-4048 24-HOUR EMERGENCY NO.							
15. GENERATOR'S CERTIFICATION: I Herby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations, and are the same materials previously approved by LEA LAND, LLC								
T R A N S P O R T E R S	PRINTED/TYPED NAME		SIGNATURE			DATE		
	16. TRANSPORTER (1) NAME: ELK ENVIRONMENTAL TEXAS I.D. NO. IN CASE OF EMERGENCY CONTACT: EMERGENCY PHONE:		17. TRANSPORTER (2) NAME: TEXAS I.D. NO. IN CASE OF EMERGENCY CONTACT: EMERGENCY PHONE:					
	18. TRANSPORTER (1): Acknowledgment of receipt of material PRINTED/TYPED NAME <i>Ramon Solis</i> SIGNATURE <i>Ramon Solis</i> DATE		19. TRANSPORTER (2): Acknowledgment of receipt of material PRINTED/TYPED NAME SIGNATURE DATE					
	D I S P O S I T O R S							
D I S P O S I T O R S	Lea Land, LLC		ADDRESS: Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM			PHONE: 505-887-4048		
	PERMIT NO. WM-01-035 - New Mexico		20. COMMENTS					
	21. DISPOSAL FACILITY'S CERTIFICATION: I Herby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes.							
AUTHORIZED SIGNATURE <i>Santa Gutierrez</i>		CELL NO.		DATE		TIME 1040		

GENERATOR: COPIES 1 & 6

DISPOSAL SITE: COPIES 2 & 3

TRANSPORTERS: COPIES 4 & 5

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

Form C-144
July 21, 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.

DEC 16 2008

OCD-ARTESIA

12-17-01

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: Forest Oil OGRID #: 8041
Address: 3504 NW County Rd Hobbs, NM 88240
Facility or well name: Skelly Unit #89
API Number: 30-015-05429 OCD Permit Number: _____
U/L or Qtr/Qtr B Section 28 Township 17S Range 31E County: Eddy
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: 50 bbl Dimensions: L 15' x W 15' x D 5'

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.

6.

Fencing: Subsection D of 19.15.17.11 NMAC (*Applies to permanent pits, temporary pits, and below-grade tanks*)

- ☐ Chain link, six feet in height, two strands of barbed wire at top (*Required if located within 1000 feet of a permanent residence, school, hospital, institution or church*)
- ☐ Four foot height, four strands of barbed wire evenly spaced between one and four feet
- ☐ Alternate. Please specify _____

7.

Netting: Subsection E of 19.15.17.11 NMAC (*Applies to permanent pits and permanent open top tanks*)

- ☐ Screen ☐ Netting ☐ Other _____
- ☐ Monthly inspections (If netting or screening is not physically feasible)

8.

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

9.

Administrative Approvals and Exceptions:

Justifications and/or demonstrations of equivalency are required. Please refer to 19.15.17 NMAC for guidance.

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

- ☐ Administrative approval(s): Requests must be submitted to the appropriate division district or the Santa Fe Environmental Bureau office for consideration of approval.
- ☐ Exception(s): Requests must be submitted to the Santa Fe Environmental Bureau office for consideration of approval.

10.

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. | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| - NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells | |
| Within 300 feet of a continuously flowing watercourse, or 200 feet of any other significant watercourse or lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark). | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| - Topographic map; Visual inspection (certification) of the proposed site | |
| Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application. (<i>Applies to temporary, emergency, or cavitation pits and below-grade tanks</i>) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| - Visual inspection (certification) of the proposed site; Aerial photo; Satellite image | <input type="checkbox"/> NA |
| Within 1000 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application. (<i>Applies to permanent pits</i>) | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| - Visual inspection (certification) of the proposed site; Aerial photo; Satellite image | <input checked="" type="checkbox"/> 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. | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| - NM Office of the State Engineer - iWATERS database search; 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 adopted pursuant to NMSA 1978, Section 3-27-3, as amended. | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| - Written confirmation or verification from the municipality; Written approval obtained from the municipality | |
| Within 500 feet of a wetland. | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| - US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site | |
| Within the area overlying a subsurface mine. | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| - Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division | |
| Within an unstable area. | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| - Engineering measures incorporated into the design; NM Bureau of Geology & Mineral Resources; USGS; NM Geological Society; Topographic map | |
| Within a 100-year floodplain. | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| - FEMA map | |

11.

Temporary Pits, Emergency Pits, and Below-grade Tanks 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.

- ☐ Hydrogeologic Report (Below-grade Tanks) - based upon the requirements of Paragraph (4) of Subsection B of 19.15.17.9 NMAC
- ☒ Hydrogeologic Data (Temporary and Emergency Pits) - based upon the requirements of Paragraph (2) of Subsection B of 19.15.17.9 NMAC
- ☒ 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 (Please complete Boxes 14 through 18, if applicable) - 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: _____

12.

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.

- ☐ Geologic and Hydrogeologic Data (only for on-site closure) - based upon the requirements of Paragraph (3) of Subsection B of 19.15.17.9
- ☐ Siting Criteria Compliance Demonstrations (only for on-site closure) - 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 (Please complete Boxes 14 through 18, if applicable) - 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: _____

☐ Previously Approved Operating and Maintenance Plan API Number: _____ (Applies only to closed-loop system that use above ground steel tanks or haul-off bins and propose to implement waste removal for closure)

13.

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 documents are attached.

- ☐ Hydrogeologic Report - based upon the requirements of Paragraph (1) of Subsection B of 19.15.17.9 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
- ☐ Quality 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 H₂S, 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

14.

Proposed Closure: 19.15.17.13 NMAC**Instructions:** Please complete the applicable boxes, Boxes 14 through 18, in regards to the proposed closure plan.

Type: ☐ Drilling ☒ Workover ☐ Emergency ☐ Cavitation ☐ P&A ☐ Permanent Pit ☐ Below-grade Tank ☐ Closed-loop System

☐ Alternative

Proposed Closure Method: ☒ Waste Excavation and Removal

☐ Waste Removal (Closed-loop systems only)

☐ 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 consideration)

15.

Waste Excavation and Removal Closure Plan Checklist: (19.15.17.13 NMAC) **Instructions:** Each of the following items must be attached to the 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 drill cuttings)
- ☒ 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

16.

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 identify 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: _____ Disposal Facility Permit Number: _____
 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

17.

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. - NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Ground water is between 50 and 100 feet below the bottom of the buried waste - NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Within 300 feet of a continuously flowing watercourse, or 200 feet of any other significant watercourse or lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark). - Topographic map; Visual inspection (certification) of the proposed site	<input type="checkbox"/> Yes <input type="checkbox"/> No
Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application. - Visual inspection (certification) of the proposed site; Aerial photo; Satellite image	<input type="checkbox"/> Yes <input type="checkbox"/> No
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; Visual inspection (certification) of the proposed site	<input type="checkbox"/> Yes <input type="checkbox"/> 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	<input type="checkbox"/> Yes <input type="checkbox"/> No
Within 500 feet of a wetland. - US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site	<input type="checkbox"/> Yes <input type="checkbox"/> No
Within the area overlying a subsurface mine. - Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division	<input type="checkbox"/> Yes <input type="checkbox"/> No
Within an unstable area. - Engineering measures incorporated into the design; NM Bureau of Geology & Mineral Resources; USGS; NM Geological Society; Topographic map	<input type="checkbox"/> Yes <input type="checkbox"/> No
Within a 100-year floodplain. - FEMA map	<input type="checkbox"/> Yes <input type="checkbox"/> No

18.

On-Site Closure Plan Checklist: (19.15.17.13 NMAC) **Instructions:** Each of the following items must be attached to the closure plan. Please indicate, by a check mark in the box, that the documents are attached.

- ☐ Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC
☐ Proof of Surface Owner Notice - based upon the appropriate requirements of Subsection F of 19.15.17.13 NMAC
☐ Construction/Design Plan of Burial Trench (if applicable) based upon the appropriate requirements of 19.15.17.11 NMAC
☐ Construction/Design Plan of Temporary Pit (for in-place burial of a drying pad) - based upon the appropriate requirements of 19.15.17.11 NMAC
☐ 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
☐ Waste Material Sampling Plan - 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 drill cuttings or in case on-site closure standards cannot be achieved)
☐ Soil Cover Design - 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

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): Rick RickmanTitle: HSE SpecialistSignature: Rick RickmanDate: 12-15-08e-mail address: rdrickman@forestoil.comTelephone: 575-392-9797

20.

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

OCD Representative Signature: Signed By Mike BennettApproval Date: DEC 17 2008

Title: _____

OCD Permit Number: N/A

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: _____

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): Rick Rickman

Title: _____

Signature: Rick

Date: _____

e-mail address: _____

Telephone: _____

New Mexico Energy, Minerals and Natural Resources Department

Bill Richardson
Governor

Joanna Prukop
Cabinet Secretary
Reese Fullerton
Deputy Cabinet Secretary

Mark Fesmire
Division Director
Oil Conservation Division



Conditions of approval for closure of a drilling or workover pit

Notify OCD District 2 office 48 hours prior to commencement of closure activities.

Notify OCD District 2 office 48 hours prior to obtaining samples where analyses of samples obtained are to be submitted to OCD.

Sampling requirements are listed in 19.15.17.13 [NMAC] (Pit Rule)

Final closure report is to be submitted to OCD not later than 60 days after completion of closure.



Elke Environmental, Inc.

P.O. Box 14167 Odessa, TX 79768
Phone (432) 366-0043 Fax (432) 366-0884

December 15, 2008

NMOCD

Attn: Larry Johnson
1625 N. French Dr.
Hobbs, NM 88240

Re: Closure Plan for Forest Oil – Skelly Unit #89

Mr. Larry Johnson

The proposed closure for the above well is waste excavation and removal. All excess fluids will be removed and disposed at a division-approved facility. The drilling mud and liner will be excavated and hauled to Controlled Recovery Inc. (Permit # R9166). After all drilling mud and liner have been removed, the pit bottoms and walls will be sampled with a minimum 5 point composite for TPH 418.1, total BTEX, Benzene, Chlorides and the DRO and GRO combined fractions. The levels will not exceed 0.2 mg/kg of Benzene; 50 mg/kg of total BTEX; 2,500 mg/kg of TPH 418.1; 500 mg/kg of combined fraction GRO/DRO; 1,000 mg/kg of Chlorides. If samples exceed these levels a C-141 will be submitted.

Once backfill is approved the site will be backfilled with clean native soil and a minimum of 1' of topsoil will be placed on the site to promote revegetation. The site will be reseeded with BLM Seed Mixture #3. A final report will be attached to the Final C-144 once closure is commenced.

Thanks,
Curtis Elam
Field Supervisor

New Mexico Office of the State Engineer
POD Reports and Downloads

Township:	<input type="text" value="17S"/>	Range:	<input type="text" value="31E"/>	Sections:	<input type="text"/>
NAD27	X: <input type="text"/>	Y: <input type="text"/>	Zone:	<input type="text"/>	Search Radius: <input type="text"/>
County:	<input type="text"/>	Basin:	<input type="text"/>	Number:	<input type="text"/>
Suffix: <input type="text"/>					
Owner Name: (First) <input type="text"/> (Last) <input type="text"/> <input type="radio"/> Non-Domestic <input type="radio"/> Domestic					
<input checked="" type="radio"/> All					
<input type="button" value="POD Surface Data Report"/> <input type="button" value="Avg. Depth to Water Report"/>					
<input type="button" value="Water Column Report"/>					
<input type="button" value="Clear Form"/> <input type="button" value="iWATERS Menu"/> <input type="button" value="Help"/>					

AVERAGE DEPTH OF WATER REPORT 12/15/2008

Bsn	Tws	Rng	Sec	Zone	X	Y	Wells	(Depth Water in Feet)		
								Min	Max	Avg

No Records found, try again

New Mexico Office of the State Engineer
POD Reports and Downloads

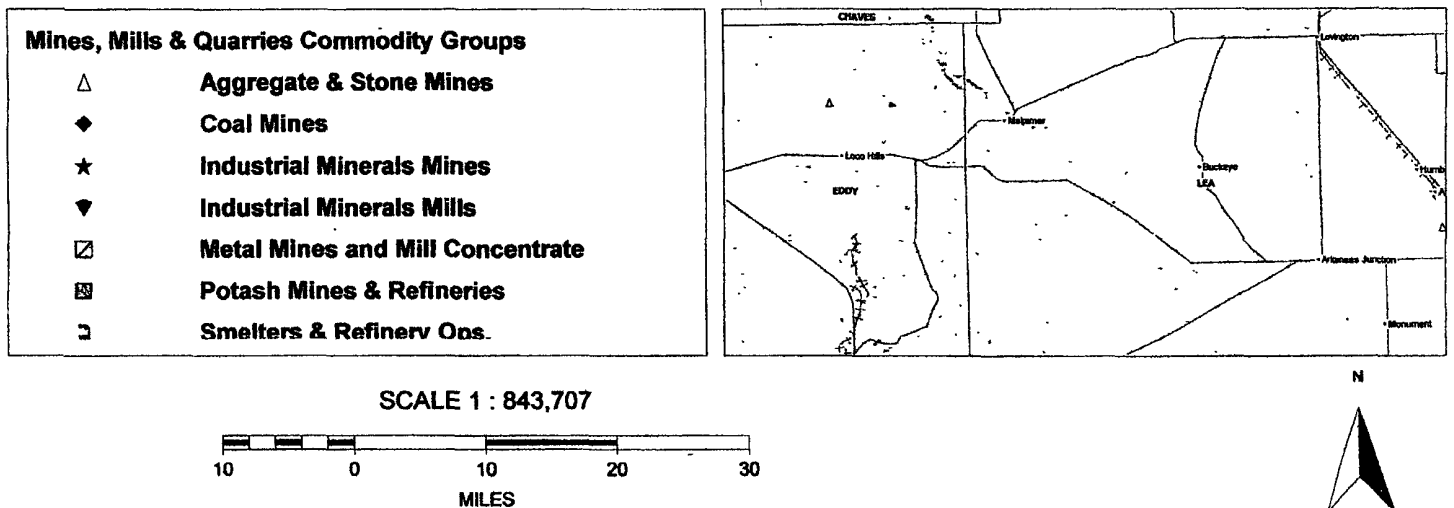
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County:	<input type="text"/>	Basin:	<input type="text"/>	Number:	<input type="text"/>
				Suffix:	<input type="text"/>
Owner Name: (First) <input type="text"/> (Last) <input type="text"/> <input type="radio"/> Non-Domestic <input type="radio"/> Domestic					
<input checked="" type="radio"/> All					
<input type="button" value="POD / Surface Data Report"/>			<input type="button" value="Avg. Depth to Water Report"/>		
<input type="button" value="Water Column Report"/>					
<input type="button" value="Clear Form"/>		<input type="button" value="WATERS Menu"/>		<input type="button" value="Help"/>	

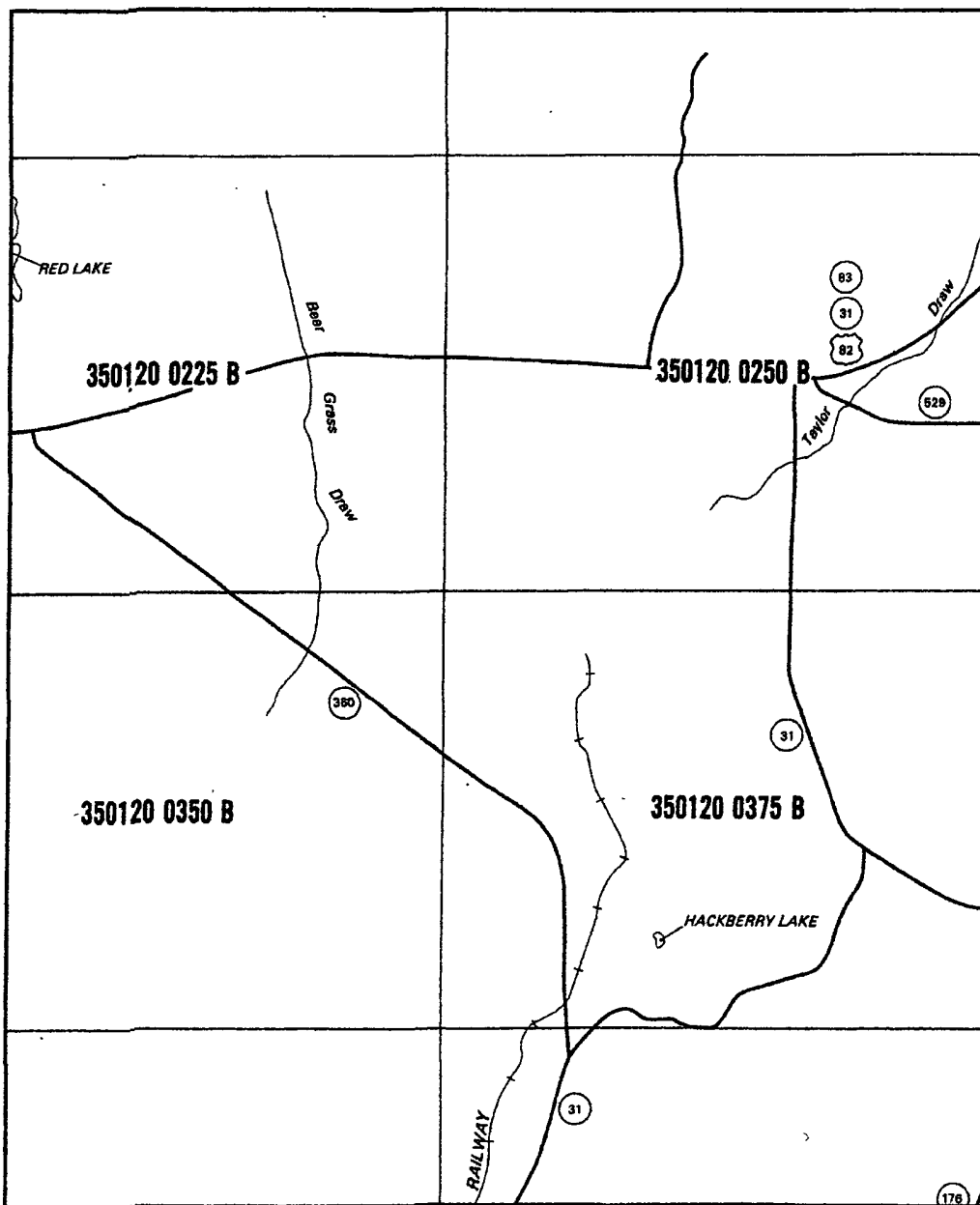
AVERAGE DEPTH OF WATER REPORT 12/15/2008

Bsn	Tws	Rng	Sec	Zone	X	Y	Wells	(Depth Water in Feet)		
								Min	Max	Avg
L	16S	31E	12				2	288	288	288

Record Count: 2

Forest - Skelly Unit #89





NATIONAL FLOOD INSURANCE PROGRAM

FIRM FLOOD INSURANCE RATE MAP

**EDDY COUNTY,
NEW MEXICO**
UNINCORPORATED AREAS

MAP INDEX

PANELS PRINTED: 25, 50, 75, 100,
125, 150, 175, 200, 225, 250, 275, 300, 325,
350, 375, 400, 425, 450, 475, 500, 525, 550,
575, 595, 600, 605, 615, 625, 650, 700, 725,
750, 775, 800, 850, 875, 900, 925, 950, 975,
1000, 1025, 1050, 1075, 1100, 1125

COMMUNITY-PANEL NUMBERS
350120 0001-1125

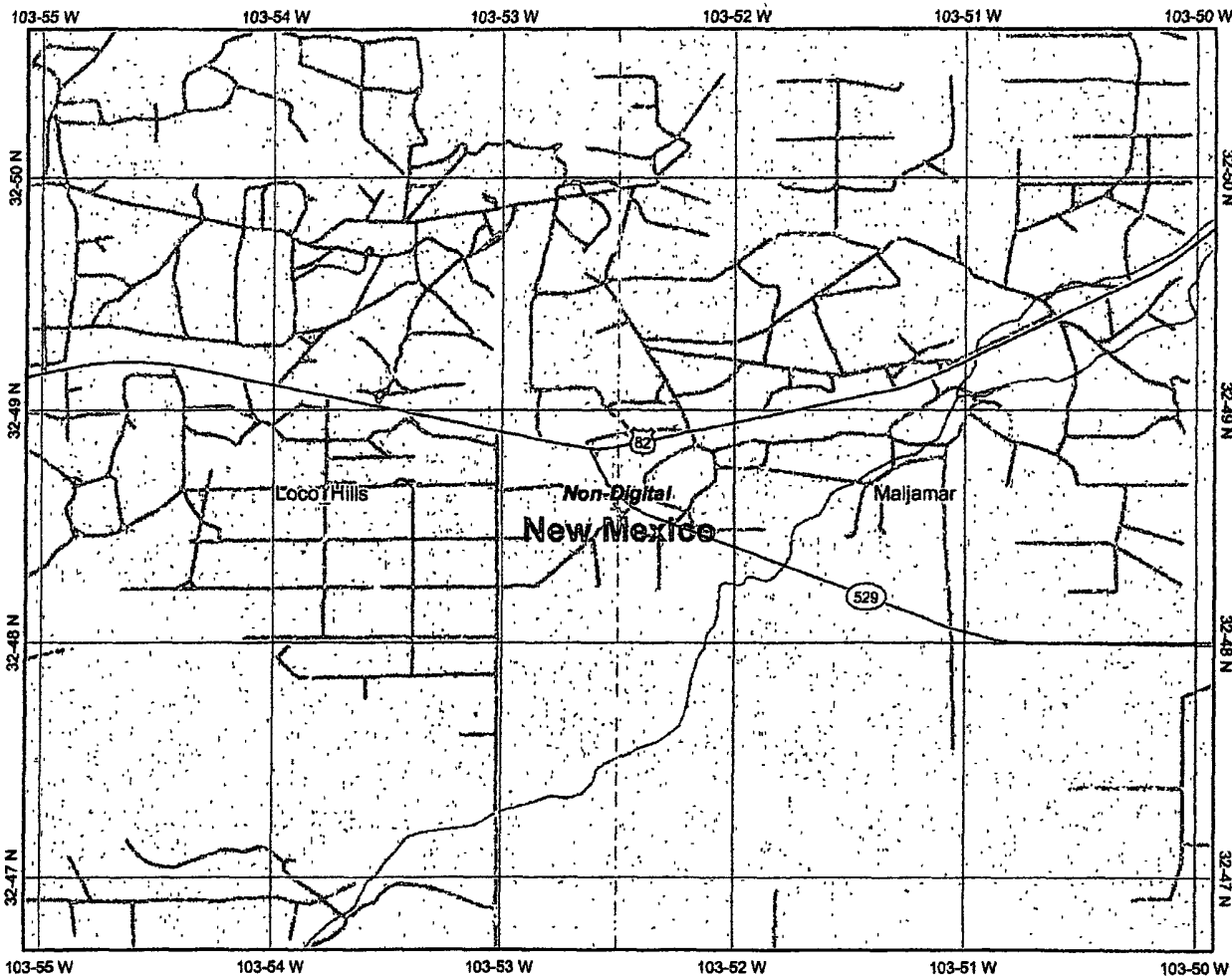
MAP REVISED:
JUNE 4, 1996



Federal Emergency Management Agency

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT On-Line. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. For the latest product information about National Flood Insurance Program flood maps check the FEMA Flood Map Store at www.msc.fema.gov.

Forest - Skelly Unit #89



Legend

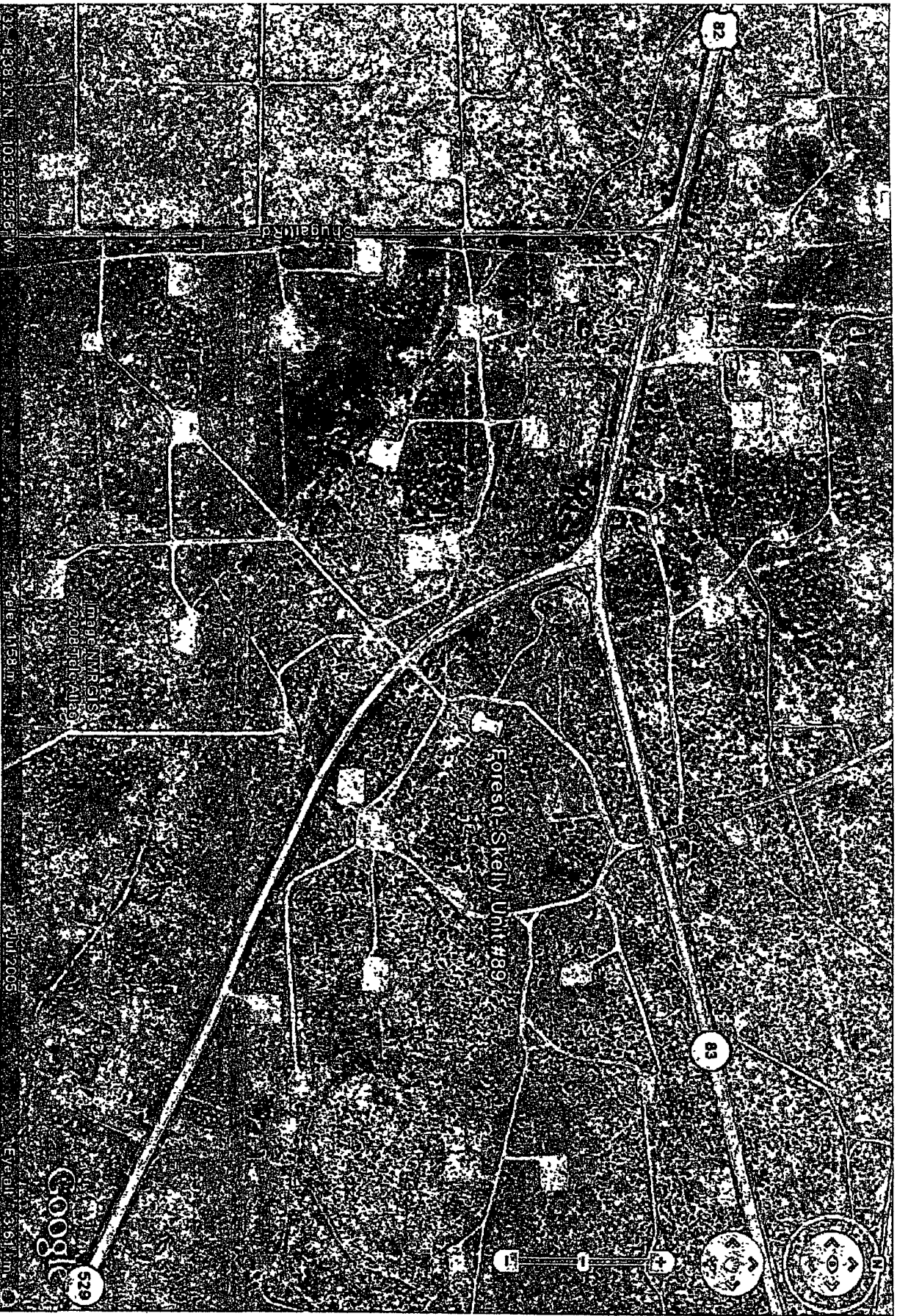
- Interstate
- Major Roads
- Other Road
- Interstate
- State highway
- US highway
- Roads
- Cities
- USGS Quad Index 24K
- Lower 48 Wetland Polygons
- Estuarine and Marine Deepwater
- Estuarine and Marine Wetland
- Freshwater Emergent Wetland
- Freshwater Forested/Shrub Wetland
- Freshwater Pond
- Lake
- Other
- Riverine
- Lower 48 Available Wetland Data
- Non-Digital
- Digital
- No Data
- Scan
- NHD Streams
- Counties 100K
- States 100K
- South America
- North America



Scale: 1:51,412

Map center: 32° 48' 40" N, 103° 52' 30" W

This map is a user generated static output from an Internet mapping site and is for general reference only. Data layers that appear on this map may or may not be accurate, current, or otherwise reliable. THIS MAP IS NOT TO BE USED FOR NAVIGATION.



33° 18' 38.32" N 103° 52' 29.68" W
Image NR0514
© 2008 Google
12 Jul 2005
Elev: 1158 m
Elev: 3361 m

Attachment E

Initial & Final C-141

Final C-144