

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 CLEZ
July 21, 2008

For closed-loop systems that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure, submit to the appropriate NMOCD District Office.

Closed-Loop System Permit or Closure Plan Application

(that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure)

Type of action: Permit Closure

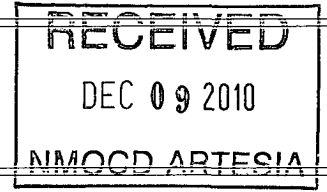
Instructions: Please submit one application (Form C-144 CLEZ) per individual closed-loop system request. For any application request other than for a closed-loop system that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure, please submit a Form C-144.

Please be advised that approval of this request does not relieve the operator of liability should operations result in pollution of surface water, ground water or the environment. Nor does approval relieve the operator of its responsibility to comply with any other applicable governmental authority's rules, regulations or ordinances.

1.
Operator: **BOPCO, L.P.** OGRID: **260737**
Address: **P.O. Box 2760, Midland, Texas 79702**
Facility or well name: **North Indian Flats "25" Federal I**
API Number: **30-015-37663** OCD Permit Number: **211496**
U/L or Qtr/Qtr: **J** Section **25** Township **21 S** Range **28 E** County: **Eddy**
Center of Proposed Design: Latitude **N 32.449836** Longitude **W -104.037419** NAD: 1927 1983
Surface Owner: Federal State Private Tribal Trust or Indian Allotment

2.
 Closed-loop System: Subsection H of 19.15.17.11 NMAC
Operation: Drilling a new well Workover or Drilling (Applies to activities which require prior approval of a permit or notice of intent) P&A
 Above Ground Steel Tanks or Haul-off Bins

3.
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



4.
Closed-loop Systems Permit Application Attachment Checklist: Subsection B of 19.15.17.9 NMAC
Instructions: Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the documents are attached.
 Design Plan - based upon the appropriate requirements of 19.15.17.11 NMAC
 Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC
 Closure Plan (Please complete Box 5) - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC
 Previously Approved Design (attach copy of design) API Number: _____
 Previously Approved Operating and Maintenance Plan API Number: _____

5.
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: **Controlled Recovery, Inc** Disposal Facility Permit Number: **R-9166**
Disposal Facility Name: _____ Disposal Facility Permit Number: _____
Will any of the proposed closed-loop system operations and associated activities occur on or in areas that will not be used for future service and operations?
 Yes (If yes, please provide the information below) No
Required for impacted areas which will not be used for future service and operations:
 Soil Backfill and Cover Design Specifications - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC
 Re-vegetation Plan - based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC
 Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC

6.
Operator Application Certification:
I hereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief.
Name (Print): **CK Jenkins** Title: **Asst Division Drilling Supervisor**
Signature: _____ Date: **12/7/10**
mail address: **CKJenkins@basspet.com** Telephone: **(432) 683-2277**

7. **OCD Approval:** Permit Application (including closure plan) Closure Plan (only)

OCD Representative Signature: RD Wade Approval Date: 05/12/2011

Title: DIST II Supervisor OCD Permit Number: 211496

8. **Closure Report (required within 60 days of closure completion):** Subsection K of 19.15.17.13 NMAC

Instructions: Operators are required to obtain an approved closure plan prior to implementing any closure activities and submitting the closure report. The closure report is required to be submitted to the division within 60 days of the completion of the closure activities. Please do not complete this section of the form until an approved closure plan has been obtained and the closure activities have been completed.

Closure Completion Date: _____

9. **Closure Report Regarding Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only:**

Instructions: Please 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

10. **Operator Closure Certification:**

I hereby certify that the information and attachments submitted with this closure report is true, accurate and complete to the best of my knowledge and belief. I also certify that the closure complies with all applicable closure requirements and conditions specified in the approved closure plan.

Name (Print): _____ Title: _____

Signature: _____ Date: _____

e-mail address: _____ Telephone: _____

BOPCO, L.P.
North Indian Flats "25" Federal 1
Section 25, T-21-S, R-28-E
Eddy County, NM

API#

OPERATING AND MAINTENANCE PLAN

Closed Loop equipment will be inspected and monitored closely on a daily basis by each tour and any necessary maintenance performed. Any leak in the system will be repaired and/or contained immediately. Within 48 hours should a spill, release or leak occur, the NMOCD District II office in Artesia (575-748-1283) will be notified. Please note that notifications may be made earlier to the district office should a greater release occur. This is in accordance with the reporting requirements specified in NMOCD's Rule 116.

CLOSURE PLAN

During and after drilling operations, liquids (which apply), all drill cuttings and drilling fluids will be hauled and disposed of at CRI (Controlled Recovery Incorporated - Permit R-9166).



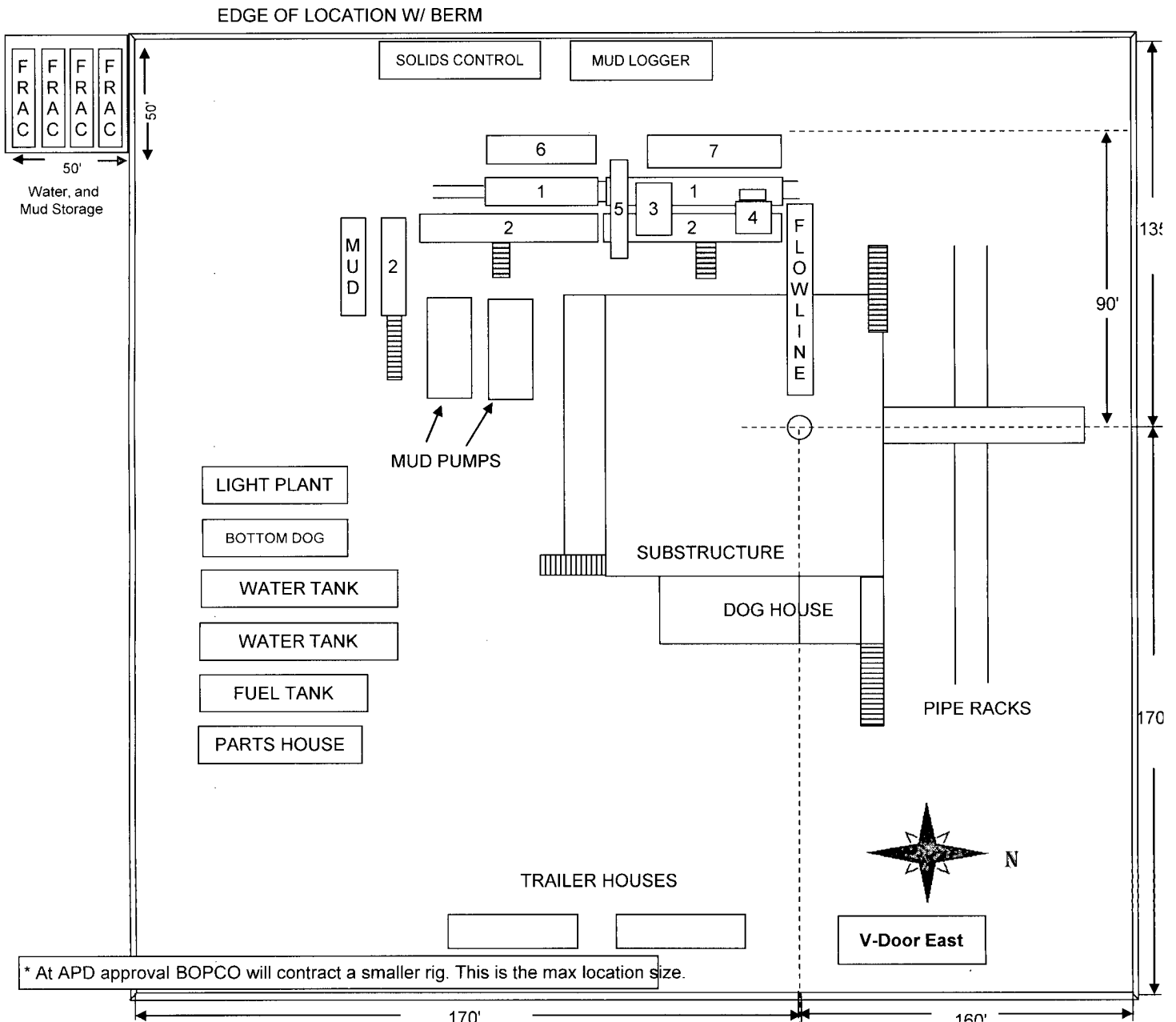
BOPCO, L.P.
 North Indian Flats 25 Federal #1
 Sec 25, T21S-R28E
 Eddy County, NM

Exhibit "C"

RIG LAYOUT SCHEMATIC
 INCLUSIVE OF CLOSED-LOOP DESIGN PLAN

Solids Control Equipment Legend

- | | |
|-----------------|--------------------|
| 1) Roll Off Bin | 5) Centrifuge |
| 2) Steel Tank | 6) Dewatering Unit |
| 3) Mud Cleaner | 7) Catch Tank |
| 4) Shaker | |





SPORT ENVIRONMENTAL SERVICES

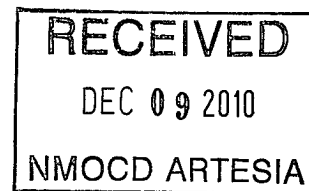
502 N. Big Spring Street, Midland, Texas 79701

Business: 432.683.1100 Fax: 888.500.0622

December 7, 2010

Mr. Randy Dade
State of New Mexico
Oil Conservation Division
1301 W. Grand Avenue
Artesia, NM 88210

Re: **NMOCD Form C-144 CLEZ**
BOPCO, L.P.
North Indian Flats "25" Federal 1
Section 25, T-21-S, R-28-E
Eddy County, New Mexico



Dear Randy,

Enclosed please find NMOCD Form C-144 CLEZ and associated documents for the aforementioned site.

If you have any questions or comments with regard to this matter, please contact me at my office (432.683.1100).

Sincerely,

A handwritten signature in black ink that reads "TASHA FINLEY".

Tasha Finley
Regulatory Compliance Manager

Enclosure: Form C-144 CLEZ

cc: BOPCO, L.P.
P. O. Box 2760
Midland, TX 79702

H₂S CONTINGENCY PLAN EMERGENCY CONTACTS

BOPCO L.P. Midland Office

432-683-2277

Key Personnel

<u>Name</u>	<u>Title</u>	<u>Cell Phone Number</u>
Bill Dannels	Drilling Supt.	432-638-9463
Buddy Jenkins	Assistant Supt.	432-238-3295
Stephen Martinez	Engineer	432-556-0262
Gary Gerhard	Engineer	432-238-2197

Ambulance	911
State Police	575-746-2703
City Police	575-746-2703
Sheriff's Office	575-746-9888
Fire Department	575-746-2701
Local Emergency Planning Committee	575-746-2122
New Mexico Oil Conservation Division	575-748-1283

Carlsbad

Ambulance	911
State Police	575-8885-3137
City Police	575-885-2111
Sheriff's Office	575-887-7551
Fire Department	575-887-3798
Local Emergency Planning Committee	575-887-6544
US Bureau of Land Management	575-887-6544

New Mexico Emergency Response Commission (Santa Fe)	505-476-9600
24 Hour	505-827-9126
New Mexico State Emergency Operations Center	505-476-9635
National Emergency Response Center (Washington, DC)	800-424-8802

Other

Boots & Coots IWC	800-256-9688 or 281-931-8884
Cudd PressureControl	432-580-3544 or 432-570-5300
Halliburton	575-746-2757
B. J. Services	575-746-3569
Flight For Life – 4000 24 th St. Lubbock, Texas	806-743-9911
Aerocare – R3, Box 49F, Lubbock, Texas	806-747-8923
Med Flight Air Amb – 2301 Yale Blvd SE #D3, Albuquerque, NM	505-842-4433
S B Air Med Service – 2505 Clark Carr Loop SE, Albuquerque, NM	505-842-4949