APPROVED CONDITIONAL By OCD District 1 at 1:16 pm, Jun 10, 2015



This is a conditional closure.1. RP-3506 will remain open until the site is decommissioned and delineated.2. Ensure BLM concurrence/approval.

Cimarex Red Hills SWD #1

CLOSURE REPORT

Release Dates: 1/08/2015, 3/29/2015

UL/M Sec 28, T25 south, R33 east, Lea county NM

API # 30-025-35598

June 4, 2015

Prepared by:

Environmental Department Diversified Field Service, Inc. 206 West Snyder Hobbs, NM 88240 Phone: (575)964-8394 Fax: (575)393-8396

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- 2 Site Activities
- 3 Conclusion

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- Appendix I Initial Form C-141
- Appendix II Site Photos
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- Appendix IV Laboratory Analyses
- Appendix V Final C-141

Red Hills SWD #1

1 INTRODUCTION

Cimarex Energy has retained Diversified Field Service, Inc. (DFSI) to address environmental issues for the site detailed herein.

The site is located south of highway 128 NM, in Lea County. The leak site resulted from a swedge failure. The impacted area is inside an unlined firewall of the battery. Approximately 140 bbls of produced water was released, and 120 bbls recovered. A C-141 was submitted to the NMOCD on January 9, 2015 (Appendix I).

A second spill at the site occurred during remediation. The leak resulted from the fiberglass line coming off the fiberglass water storage tank snapping at the connection. Approximately 330 bbls of produced water was released, and 270 bbls were recovered. A C-141 was submitted to the NMOCD on March 30, 2015 (Appendix I).

2 SITE ACTIVITIES

On February 3, 2015 DFSI personnel delineated 8 sample points of the leak area. Each sample was tested for chloride levels as well as BTEX. The BTEX samples were performed using a Mini Rae Photoionization Detector (PID). The results are attached (Appendix IV).

DFSI personnel returned to the site to begin excavation. The entire spill area inside the bermed facility was excavated to 2' bgs. During remediation, a second spill occurred on location. DFSI re-sampled the location, as the new spill occurred over the same area as the first spill. The workplan for the first spill was implemented for the second spill and the site was restored to its previous state.

All contaminated soil was hauled to an approved NM state disposal. Fresh caliche was brought in for backfill. The berms were also rebuilt. The location was restored to its previous state.

Photographs of site activities can be viewed in Appendix II.

3 CONCLUSION

DFSI, on behalf of Cimarex, respectfully requests the closure of the regulatory file for the site.

Appendix I

INITIAL FORM C-141

State of New Mexico Energy Minerals and Natural Resources

Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505 Submit 1 Copy to appropriate District Office in accordance with 19.15.29 NMAC.

| 1220 S. St. Fran | icis Dr., Sant | a Fe, NM 8750 | \$ | Sa | anta I | Fe, NM 875 | 505 | | | | | | |
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| | | | Rel | ease Notifi | catio | on and Co | orrective A | ction | | | | | |
| | | | | | | OPERA | ГOR | | 🛛 Initia | al Report | | Final Report | |
| | | imarex Ener | | | | Contact Ch | ristine Alderma | in | | | | | |
| Address 60 | 0 N Marie | nfeld Ste 60 | 0 Midlan | d TX | | Telephone 1 | No. 432-853-70 |)59 | | | | | |
| Facility Na | me Red H | ills SWD #1 | | | | Facility Typ | e SWD | | | | | | |
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| and 120 bbls | were recove | ered | | | | | | | | | | | |
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| Signature: | | MUY IN | ine | marc | | Annround he | Environmental S | nocialist | liet | | | | |
| Printed Name | e: Christine | Alderman | | | | Approved by | Environmental 5 | | | | | | |
| Title: ESH S | upervisor | | | | | Approval Dat | | E | xpiration I | Date: | | | |
| E mail Adda | noi addar- | non@aimara | oom | | | Conditions of | Approval | | | | | | |
| E-mail Addre | | ~~~ | | | | Conditions 01 | approvai. | | | Attached | | | |
| Date: /-/4 | +-15 | Phone | 432-853- | 7059 | | | | | | | | | |

* Attach Additional Sheets If Necessary

State of New Mexico **Energy Minerals and Natural Resources**

Form C-141 Revised August 8, 2011

Oil Conservation Division 1220 South St. Francis Dr. Q, NIN 07505 and D

Submit 1 Copy to appropriate District Office in accordance with 19.15.29 NMAC.

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| Signature: | hus | tine A | lde | rman | | | 010 0011 | | 11 21 1131 | 011 | | | | |
| Printed Name | : Christine | Alderman | | | | Approved by Environmental Speci | | | cialist: | | | | | |
| Title: ESH S | upervisor | | | | | Approval Dat | e; | Expirati | on Date: | | | | | |
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| L-man Audit | aa, caluelli | managennatex | | | ····· | Conditions of | Conditions of Approval: Attached | | | | | | | |

Date: Phone: 432-853-7059 * Attach Additional Sheets If Necessary

3/30/2015

Appendix II

SITE PHOTOS



Red Hills SWD #1

Release Date: 1/08/2015, 3/29/2015

UL/M Sec 28, T25 south, R33 east, Lea county NM

API # 30-025-35598



Initial spill photos inside bermed area



Initial spill photos inside bermed area



Initial spill photos inside bermed area



Initial spill photos inside bermed area







Initial spill around tanks



Second spill inside bermed area. Fluid being recovered by vacuum truck



Spill area excavated to 2' bgs



Spill area excavated to 2' bgs



Fresh caliche being brought in for backfill



Fresh caliche being used for backfill



Caliche used for backfill around tanks



Compacting and constructing new berms around facility

Appendix III

SITE MAP

Site Diagram



Appendix IV

FIELD SAMPLING ANALYSIS

Diversified Environmental Services

| Company Name: | cimarex |
|----------------|------------------|
| Location Name: | red hills swd #1 |

2/4/2015 Rel Date:

SP Date:

| SP1 | CHL | PID | SP2 | CHL | PID | SP3 | CHL | PID | SP4 | CHL | PID | SP5 | CHL | PID |
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| surf | 874 | 386.9 | surf | 2799 | 575.3 | surf | 5598 | | surf | 799 | 75.4 | surf | 1024 | 122 |
| 1 | 5798 | 416.3 | 1 | 3373 | 70.9 | 1 | 6847 | | 1 | 1999 | 0 | 1 | 1749 | 52 |
| 2 | 6647 | 94.9 | 2 | 3673 | 74.5 | 2 | 7347 | | 2 | 1749 | 0 | 2 | 3049 | 22 |
| 3 | 6772 | 34.8 | 3 | 2999 | 110.7 | 3 | 4823 | | 3 | 4374 | 0 | 3 | 3823 | 5.4 |
| 4 | 4748 | 12.9 | 4 | 4623 | 101.3 | 4 | 5748 | | 4 | 1474 | 0 | 4 | 749 | 0 |
| 5 | 4773 | 22.5 | 5 | 3698 | 14.5 | 5 | 1824 | | 5 | 1649 | 0 | 5 | 1399 | 0 |
| 6 | 4998 | 13.8 | 6 | 3673 | 29.4 | 6 | 2799 | | 6 | 1899 | 0 | 6 | 1499 | 0 |
| 7 | 4623 | 45.2 | 7 | 6098 | 5.1 | 7 | 2324 | | 7 | 3149 | 0 | 7 | 2074 | 0.7 |
| 8 | 5448 | 61.3 | 8 | 4673 | 101.5 | 8 | 3573 | | 8 | 3224 | 0 | 8 | 1624 | 0.9 |
| 9 | 3998 | 45.3 | g | 4623 | 9.5 | 9 | 1899 | | 9 | 3748 | 0 | 9 | 3149 | 1.7 |
| 10 | 3623 | 99.7 | 10 | 4848 | 15.2 | 10 | 1974 | | 10 | auger refus | al | 10 | 1274 | 1.5 |
| 11 | 2674 | 369.2 | 11 | . 4448 | 22.5 | 11 | 1999 | | | | | 11 | 1199 | 0.2 |
| 12 | 3174 | 260.1 | 12 | 4373 | 15.4 | 12 | 2624 | | | | | 12 | 1274 | 0.1 |
| 13 | 3423 | 184.2 | 13 | 3873 | 40.3 | 13 | 4098 | | | | | 13 | 1724 | 1.8 |
| 14 | 3298 | 124.6 | 14 | 3773 | 45.1 | 14 | auger refu | sal | | | | 14 | auger refus | sal |
| 15 | 3248 | 144.6 | 15 | 3598 | 10.5 | | | | | | | | | |
| 16 | 3298 | 109.4 | 16 | 3074 | 7.1 | | | | | | | | | |
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| Lab Confirmation Sample |
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| Needs Delineation and confirmation samples |

| SP6 | CHL | PID | SP7 | CHL | PID | SP8 | CHL | PID | SP9 | CHL | PID | SP10 | CHL | PID |
|------|-------------|------|------|-------------|-----|------|-------------|------|-----|-----|-----|------|-----|-----|
| surf | 499 | 39.8 | surf | 1699 | 0.1 | surf | 1699 | 20.5 | | | | | | |
| 1 | 3099 | 20.6 | 1 | 5948 | 0 | 1 | 5948 | 0 | | | | | | |
| 2 | 3298 | 3.9 | 2 | 3099 | 0 | 2 | 3099 | 0 | | | | | | |
| 3 | 5123 | 1.4 | 3 | 2374 | 0 | 3 | 2374 | 0 | | | | | | |
| 4 | 1274 | 6.7 | 4 | 2924 | 0 | 4 | 2924 | 0 | | | | | | |
| 5 | 1274 | 0.1 | 5 | 1149 | 0 | 5 | 1149 | 0 | | | | | | |
| 6 | 1199 | 0.8 | 6 | 1024 | 0 | 6 | 1024 | 0 | | | | | | |
| 7 | 824 | 0.1 | 7 | 524 | 0 | 7 | 524 | 0 | | | | | | |
| 8 | 824 | 0.5 | 8 | 1799 | 0 | 8 | 1799 | 0 | | | | | | |
| 9 | 1174 | 26.3 | 9 | 1724 | 0 | 9 | 1499 | 0 | | | | | | |
| 10 | 1324 | 0.3 | 10 | 1499 | 0 | 10 | 1724 | 0 | | | | | | |
| 11 | 1449 | 0.6 | 11 | 1924 | 0 | 11 | 1499 | 0 | | | | | | |
| 12 | 1499 | 11.1 | 12 | 1424 | 0 | 12 | 1924 | 0 | | | | | | |
| 13 | 1674 | 0.4 | 13 | 1499 | 0 | 13 | 1424 | 0 | | | | | | |
| 14 | 1874 | 0 | 14 | auger refus | sal | 14 | auger refus | sal | | | | | | |
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| | Field Sampling |
| | Needs Delineation and confirmation samples |

Diversified Environmental Services

Company Name:CIMAREXLocation Name:RED HILLS SWD 1

SP Date: 3/30/2015

Rel Date:

| SP1 | CHL | PID | SP2 | CHL | PID | SP3 | CHL | PID | SP4 | CHL | ТРН | SP5 | CHL | TPH |
|-----|------|------|-----|-----------|-------|-----|------|------|-----|-----|-----|-----|-----|-----|
| 2' | 4273 | 35.6 | 2' | 2174 | 22.6 | 2' | 6522 | 30.6 | | | | | | |
| 3' | 2249 | 28.3 | 3' | 6198 | 30.4 | 3' | 674 | 18.7 | | | | | | |
| 4' | 1499 | 32.4 | 4' | 3373 | 32.6 | 4' | 749 | 12.2 | | | | | | |
| 5' | 1549 | 17.1 | 5' | 2924 | 19.1 | | | | | | | | | |
| 6' | 1374 | 23.4 | 6' | 2249 | 22.3 | | | | | | | | | |
| 7' | 1374 | 30 | 7' | 6997 | 20.1 | | | | | | | | | |
| 8' | 1124 | 36.2 | 8' | AUGER REI | USALE | | | | | | | | | |
| 9' | 899 | 41.2 | | | | | | | | | | | | |
| 10' | 899 | 38.6 | | | | | | | | | | | | |
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| | Field Sampling |
| | Needs Delineation and confirmation samples |

Diversified Environmental Services

| SP6 | CHL | ТРН | SP7 | CHL | ТРН | SP8 | CHL | TPH | SP9 | CHL | ТРН | SP10 | CHL | ТРН |
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| Lab Confirmation Sample |
|--|
| Field Sampling |
| Needs Delineation and confirmation samples |

| SP16 | CHL | ТРН | SP17 | CHL | ТРН | SP18 | CHL | ТРН | SP19 | CHL | ТРН | SP20 | CHL | TPH |
|------|-----|-----|------|-----|-----|------|-----|-----|------|-----|-----|------|-----|-----|
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| | Lab Confirmation Sample |
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| | Field Sampling |
| | Needs Delineation and confirmation samples |

Appendix V

FINAL C-141

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

| | OPERATOR | Initial Report | x Final Report |
|---|----------------------------|----------------|----------------|
| Name of Company Cimarex Energy | Contact Christine Alderman | | |
| Address 600 N Marienfeld Ste 600 Midland TX | Telephone No. 432-853-7059 | | |
| Facility Name Red Hills SWD #1 | Facility Type SWD | | |
| | | | |

Surface Owner Mineral Owner Lease No. LOCATION OF RELEASE Unit Letter Section Township Range Feet from the North/South Line Feet from the East/West Line County

| M 28 25S 33E 660 S 660 W Lea |
|------------------------------|
|------------------------------|

Latitude 32.09614 Longitude -103.58256

| NATURE | OF RELEASE | |
|--------|------------|--|
| MAIONE | OD REDEADE | |

| Type of Release Produced Water | Volume of Release 140 bbls | Volume Re | | | | | | |
|--|--|-----------------|--|--|--|--|--|--|
| Source of Release Tri-plex pump | Date and Hour of Occurrence1-8-15 | Date and E | lour of Discovery 1-8-15 12 p.m. | | | | | |
| Was Immediate Notice Given? | If YES, To Whom? | | | | | | | |
| 🔟 🔟 Yes 🗌 No 🔲 Not Required | ed Doc Oberding/Sol Hughes | | | | | | | |
| By Whom? Christine Alderman | Date and Hour 1-9-15 2:06 p.m. | | | | | | | |
| Was a Watercourse Reached? | If YES, Volume Impacting the Wa | tercourse. | · · · | | | | | |
| Yes X No | | | | | | | | |
| | | | | | | | | |
| If a Watercourse was Impacted, Describe Fully.* | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Describe Cause of Problem and Remedial Action Taken.* | | | | | | | | |
| A swedge failed on the discharge side of the tri-plex pump. All fluids were co | ntained in an unlined earthen berm. Appr | oximately 140 | bbls were released and 120 bbls | | | | | |
| were recovered. | | | | | | | | |
| | | | | | | | | |
| Describe Area Affred I - 1 (I + | | | | | | | | |
| Describe Area Affected and Cleanup Action Taken.* | | | | | | | | |
| 119'x68' bermed containment. Diversified Environmental excavated the | spill area to 2' bgs per the BLM and NMC | ICD. Fresh cali | che was brought in for backfill, | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| I hereby certify that the information given above is true and complete to | the best of my knowledge and understa | and that pursu | ant to NMOCD rules and | | | | | |
| regulations all operators are required to report and/or file certain release | notifications and perform corrective ac | tions for relea | uses which may endanger | | | | | |
| public health or the environment. The acceptance of a C-141 report by the | | | | | | | | |
| should their operations have failed to adequately investigate and remedia | | | | | | | | |
| or the environment. In addition, NMOCD acceptance of a C-141 report | loes not relieve the operator of respon- | sibility for co | mpliance with any other | | | | | |
| federal, state, or local laws and/or regulations. | | | | | | | | |
| AL IN INC. | OIL CONSERV | VATION I | DIVISION | | | | | |
| Signaturo: Christine alderman | | | | | | | | |
| Signadad, Croose bord With Outrobard | | | | | | | | |
| Printed Name: Christine Alderman | Approved by District Supervisor: | | | | | | | |
| | | | ······································ | | | | | |
| Title: ESH Supervisor | Approval Date: | Expiration D | ate: | | | | | |
| | | • • • • | | | | | | |
| E-mail Address: calderman@cimarex.com | Conditions of Approval: | | Attached | | | | | |
| 1 1 4 15 | | | | | | | | |
| Date: 1-14-15 Phone: 432-853-7059 | | | | | | | | |

* Attach Additional Sheets If Necessary

State of New Mexico Energy Minerals and Natural Resources

Form C-141 Revised October 10, 2003

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Oil Conservation Division 1220 South St. Francis Dr. Santa Fc, NM 87505 Submit 2 Copies to appropriate District Office in accordance with Rule 116 on back side of form

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| | | | Rel | ease Notifi | catio | on and Co | orrective A | ction | | | | | |
| | | | | | | OPERA ' | FOR | 🗍 Initia | d Report | Ī | Final Report | | |
| Name of Co | ompany Ci | marex Energy | | | | Contact Christine Alderman | | | | | | | |
| | | nfeld Ste 600 N | 4idland TX | | | Telephone No. 432-853-7059 | | | | | | | |
| Facility Na | ne Red Hill | ls SWD #1 | | | | Facility Type SWD | | | | | | | |
| Surface Ow | Surface Owner Mineral Owner | | | | | | | Lease N | ío | | | | |
| \ | | | | | | | | l | | | | | |
| TT-24 T -44 | <u> </u> | T | D | | | N OF RE | | The second second second | Country | | | | |
| Unit Letter | Section | Township | Range | Feet from the | INOPE | h/South Line S | Feet from the | East/West Line | County | | | | |
| M | M 28 25S 33E 660 | | | | | | 660 | W | Lea | | | | |
| | | | T.a | titude 32.09614 | | Longitud | le103.58256 | | | | | | |
| | | | Da | | | | | _ | | | | | |
| Am. (| | , | | NAT | URI | OF REL | | | | | | | |
| Type of Rele Source of Re | | uced Water | | | | | Release 330 bbl | s Volume R e3-29-15 Date and 1 | | 270 bb | | | |
| Was Immedi | | -plex pump Diven? | | | | If YES, To | | | ciour or Dis | covery | <u>3-29-15 12 p.m</u> | | |
| | | | Yes 🗌 |] No 🔲 Not R | equired | | Doc Oberding/Se | ol Hughes | | | | | |
| By Whom? | Christine | Alderman | | | | Date and H | our 3-30-15 11 a | - | | | | | |
| Was a Water | | ched? | | , | | If YES, Vo | lume Impacting t | he Watercourse. | | | | | |
| | | Ĺ | Yes x | No | | | | | | | | | |
| If a Watercon | ırse was Im | pacted, Descr | ibe Fully, | 8 | | • | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | • | | |
| 1 | | | | | | | | | | | | | |
| Describe Cau | ise of Probl | em and Reme | dial Actio | n Taken,* | | | | | | | | | |
| The fibergl | ass line comi | ng off of the fil | oerglass wa | ter storage tank sna | apped o | ff at the connect | ion. | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| Describe Are | | | | | | | | | | | | | |
| | | | | | | | | 6. All contaminants v | | | | | |
| Diversif | ied Environr | nental excavato | ed the entir | e spill area to 2' bg | s and bi | ought in fresh c | aliche for backfill, a | as the site was return | ed to its prev | ious sta | ate. | | |
| | | . <u></u> | | | | | | | | | | | |
| | | | | | | | | nderstand that purs tive actions for rele | | | | | |
| | | | | | | | | eport" does not reli | | | | | |
| should their o | perations h | ave failed to a | adequately | investigate and r | emedia | ite contaminati | on that pose a thr | eat to ground water | , surface wa | ater, hu | unan health | | |
| | | | | tance of a C-141 | report | does not reliev | e the operator of | responsibility for co | ompliance v | vith any | y other | | |
| tederal, state | or local lay | vs and/or regu | ilations. | | | | | OF DUATION | | N NT | | | |
| | 14 + | - · 1 | A I | | | | <u>UIL CON</u> | SERVATION | DIVISIC | <u>711</u> | | | |
| Signature: U | nusi | the a | lder | man | | | | | | | | | |
| Printed Name | . Christine | Alderman | | | | Approved by | District Supervis | or: | | | | | |
| | Guraule | 210001118411 | | a lt. 1 | | | | | | | | | |
| Title: EHS | Supervisor | | | | | Approval Dat | e: | Expiration 1 | Date: | | | | |
| | | | | | | | | | | | | | |
| E-mail Addre | ss: calde | rman@cimarex | c.com | | | Conditions of | Approval: | | Attached | | | | |
| Date: 3-30- | 2015 | | Phone: | 432-853-7059 | | | | | | | | | |

* Attach Additional Sheets If Necessary