<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 District II 811 S. First St., 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

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

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

Form C-141

Revised April 3, 2017

| Release Notification and Corrective Action  |  |                |   |                      |            |   |                   |                                       |              |               |        |           |        |  |
|---|--|----------------|---|----------------------|------------|---|-------------------|---------------------------------------|--------------|---------------|--------|-----------|--------|--|
|   |  | OPERATOR       |   |                      |            |   | $\boxtimes$       | Fina1                                 | Repor        |               |        |           |        |  |
| Name of Co  |  | BC Operatir    |   | Contact Jason Wacker |            |   |                   |                                       |              |               |        |           |        |  |
| Address 4   | 4000 N. Bi   |                | Telephone No. (432) 684-9696 Facility Type Tank Battery |                      |            |   |                   |                                       |              |               |        |           |        |  |
|   |  |                |   |                      |            |   |                   |                                       |              |               |        |           |        |  |
| Surface Owner Darr Angell Mineral Owner   |  |                |   |                      |            | API No. 30-025-37902                                  |                   |                                       |              |               |        |           |        |  |
|   |  |                |   |                      |            | OF RE   | ,                 |                                       |              |               |        |           |        |  |
| Unit Letter   | Unit Letter Section Township Range Feet from the Nor |                |   |                      |            |   | Feet from the     | West Line   County                    |              |               |        |           |        |  |
| A   | A 11 17S 36E 660 No                                  |                |   |                      | North      |   | 660               | East                                  | Lea          |               |        |           |        |  |
|   |  |                | Latitud   | e 32.854999          | ongitude1  | 103.318771  | NAD               | 83                                    |              |               |        |           |        |  |
|   | NATURE OF RELEASE                                    |                |   |                      |            |   |                   |                                       |              |               |        |           |        |  |
| Type of Release Oil   |  |                |   |                      |            | Volume of Release 20 bbls Volume Recovered 18 bbls    |                   |                                       |              |               |        |           |        |  |
| Source of Release Tank Overflow at Battery  |  |                |   |                      |            | 4/22/08   | lour of Occurrenc | Date and Hour of Discovery<br>4/22/08 |              |               |        |           |        |  |
| Was Immediate Notice Given?  ☐ Yes ☐ No ☐ Not Required  |  |                |   |                      |            | If YES, To Whom?  Mark Whitaker                       |                   |                                       |              |               |        |           |        |  |
| By Whom? Pam Botkin   |  |                |   |                      |            | Date and Hour 4/23/08 0930                            |                   |                                       |              |               |        |           |        |  |
| Was a Watercourse Reached?  ☐ Yes ☒ No  |  |                |   |                      |            | If YES, Volume Impacting the Watercourse.             |                   |                                       |              |               |        |           |        |  |
| If a Watercourse was Impacted, Describe Fully.*   |  |                |   |                      |            |   |                   |                                       |              |               |        |           |        |  |
| APPROVED  |  |                |   |                      |            |   |                   |                                       |              |               |        |           |        |  |
| By Olivia Yu at 3:06 pm, Oct 31, 2017   |  |                |   |                      |            |   |                   |                                       |              |               |        |           |        |  |
| Describe Cause of Problem and Remedial Action Taken.*   |  |                |   |                      |            |   |                   |                                       |              |               |        |           |        |  |
|   |  |                |   |                      |            |   |                   |                                       |              |               |        |           |        |  |
| Tank overflow inside firewall, free oil was recovered with a vacuum truck, contaminated soil was dug up and hauled off.   |  |                |   |                      |            |   |                   |                                       |              |               |        |           |        |  |
|   |  |                |   |                      |            |   |                   |                                       |              |               |        |           |        |  |
| Describe Area   |  |                |   |                      | h some c   | hloride conta   | amination outside | of the f                              | irewall on   | the south and | d sout | heast sid | les of |  |
| the tank batte  | ry. The are  | a was delineat | ted vertica   | lly and horizonta    | lly for Bo | enzene, BTE   | X, TPH and Chlor  | ride, and                             | d the identi | fied contami  | nated  | soils     |        |  |
| (including firewall materials) were excavated to 4 feet below grade with a 30 mil. poly-liner laid in the floor of the excavation and keyed into place around the edges. The lined excavation was then backfilled and compacted with caliche in 1 foot lifts to match the grade of the well pad. Closure Report was |  |                |   |                      |            |   |                   |                                       |              |               |        |           |        |  |
| approved on October 2, 2017.  |  |                |   |                      |            |   |                   |                                       |              |               |        |           |        |  |
| 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 law   | s and/or regu  | lations.  |                      |            |   |                   | 1001                                  | A (TION)     | DIVIGIO       | N.T.   |           | -      |  |
|   |  |                |   |                      |            | OIL CONSERVATION DIVISION                             |                   |                                       |              |               |        |           |        |  |
| Signature: Josep Waler  |  |                |   |                      |            |   |                   |                                       |              |               |        |           |        |  |
| Printed Name: Vason Wacker  |  |                |   |                      |            | Approved by Environmental Specialist:                 |                   |                                       |              |               |        |           |        |  |
| Title: Petroleum Engineer   |  |                |   |                      | A          | Approval Date: 10/31/2017 Expiration Date: XX/XX/XXXX |                   |                                       |              |               |        |           |        |  |
| E-mail Address: jwacker@bcoperating.com   |  |                |   |                      | c          | Conditions of Approval: 1RP #1849 Attached            |                   |                                       |              |               |        |           |        |  |
| Date: 10/20/  | 2017   | Phone:         | -9696   |                      |            |   |                   |                                       |              |               |        |           |        |  |

<sup>\*</sup> Attach Additional Sheets If Necessary