

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-144  
March 12, 2004

For drilling and production facilities, submit to appropriate NMOCD District Office.  
For downstream facilities, submit to Santa Fe office

**Pit or Below-Grade Tank Registration or Closure**

Is pit or below-grade tank covered by a "general plan"? Yes ☒ No ☐

Type of action: Registration of a pit or below-grade tank ☒ Closure of a pit or below-grade tank ☐

Operator: <b>Mack Energy Corporation</b> Telephone: <b>(505)748-1288</b> e-mail address: <b>jerrys@mackenergycorp.com</b>				
Address: <b>P.O. Box 960, Artesia, NM 88211-0960</b>				
Facility or well name: <b>Cockburn A State</b> API #: <b>30-025-25286</b> U/L or Qtr/Qtr <b>F</b> Sec <b>32</b> T <b>17S</b> R <b>33E</b>				
County: <b>Lea</b> Latitude _____ Longitude _____ NAD: 1927 <input type="checkbox"/> 1983 <input type="checkbox"/> Surface Owner Federal <input type="checkbox"/> State <input checked="" type="checkbox"/> Private <input type="checkbox"/> Indian <input type="checkbox"/>				
<table border="1"><tr><td><b>Pit</b> Type: Drilling <input type="checkbox"/> Production <input type="checkbox"/> Disposal <input type="checkbox"/> Workover <input checked="" type="checkbox"/> Emergency <input type="checkbox"/> Lined <input checked="" type="checkbox"/> Unlined <input type="checkbox"/> Liner type: Synthetic <input checked="" type="checkbox"/> Thickness <b>20</b> mil Clay <input type="checkbox"/> Volume _____ bbl</td><td><b>Below-grade tank</b> Volume: _____ bbl Type of fluid: _____ Construction material: _____ Double-walled, with leak detection? Yes <input type="checkbox"/> If not, explain why not, _____</td></tr></table>			<b>Pit</b> Type: Drilling <input type="checkbox"/> Production <input type="checkbox"/> Disposal <input type="checkbox"/> Workover <input checked="" type="checkbox"/> Emergency <input type="checkbox"/> Lined <input checked="" type="checkbox"/> Unlined <input type="checkbox"/> Liner type: Synthetic <input checked="" type="checkbox"/> Thickness <b>20</b> mil Clay <input type="checkbox"/> Volume _____ bbl	<b>Below-grade tank</b> Volume: _____ bbl Type of fluid: _____ Construction material: _____ Double-walled, with leak detection? Yes <input type="checkbox"/> If not, explain why not, _____
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Depth to ground water (vertical distance from bottom of pit to seasonal high water elevation of ground water.)	Less than 50 feet 50 feet or more, but less than 100 feet 100 feet or more	(20 points) (10 points) (0 points) <b>0 Points</b>		
Wellhead protection area: (Less than 200 feet from a private domestic water source, or less than 1000 feet from all other water sources.)	Yes No	(20 points) (0 points) <b>0 Points</b>		
Distance to surface water: (horizontal distance to all wetlands, playas, irrigation canals, ditches, and perennial and ephemeral watercourses.)	Less than 200 feet 200 feet or more, but less than 1000 feet 1000 feet or more	(20 points) (10 points) (0 points) <b>0 Points</b>		
<b>Ranking Score (Total Points)</b>		<b>0 Points</b>		

**If this is a pit closure:** (1) attach a diagram of the facility showing the pit's relationship to other equipment and tanks. (2) Indicate disposal location:

onsite ☐ offsite ☐ If offsite, name of facility \_\_\_\_\_ (3) Attach a general description of remedial action taken including remediation start date and end date. (4) Groundwater encountered: No ☐ Yes ☐ If yes, show depth below ground surface \_\_\_\_\_ ft. and attach sample results. (5) Attach soil sample results and a diagram of sample locations and excavations.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that the above-described pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☒, or an (attached) alternative OCD-approved plan ☐

Date: **4/29/2004**

Printed Name/Title **Jerry W. Sherrell/Production Clerk**

Signature

*Jerry W. Sherrell*

Your certification and NMOCD approval of this application/closure does not relieve the operator of liability should the contents of the pit or tank contaminate ground water or otherwise endanger public health or the environment. Nor does it relieve the operator of its responsibility for compliance with any other federal, state, or local laws and/or regulations.

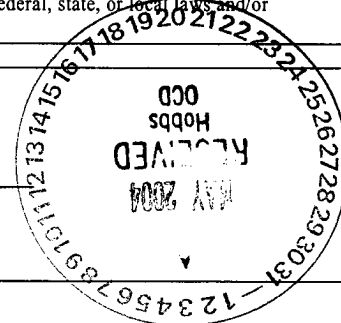
Approval:

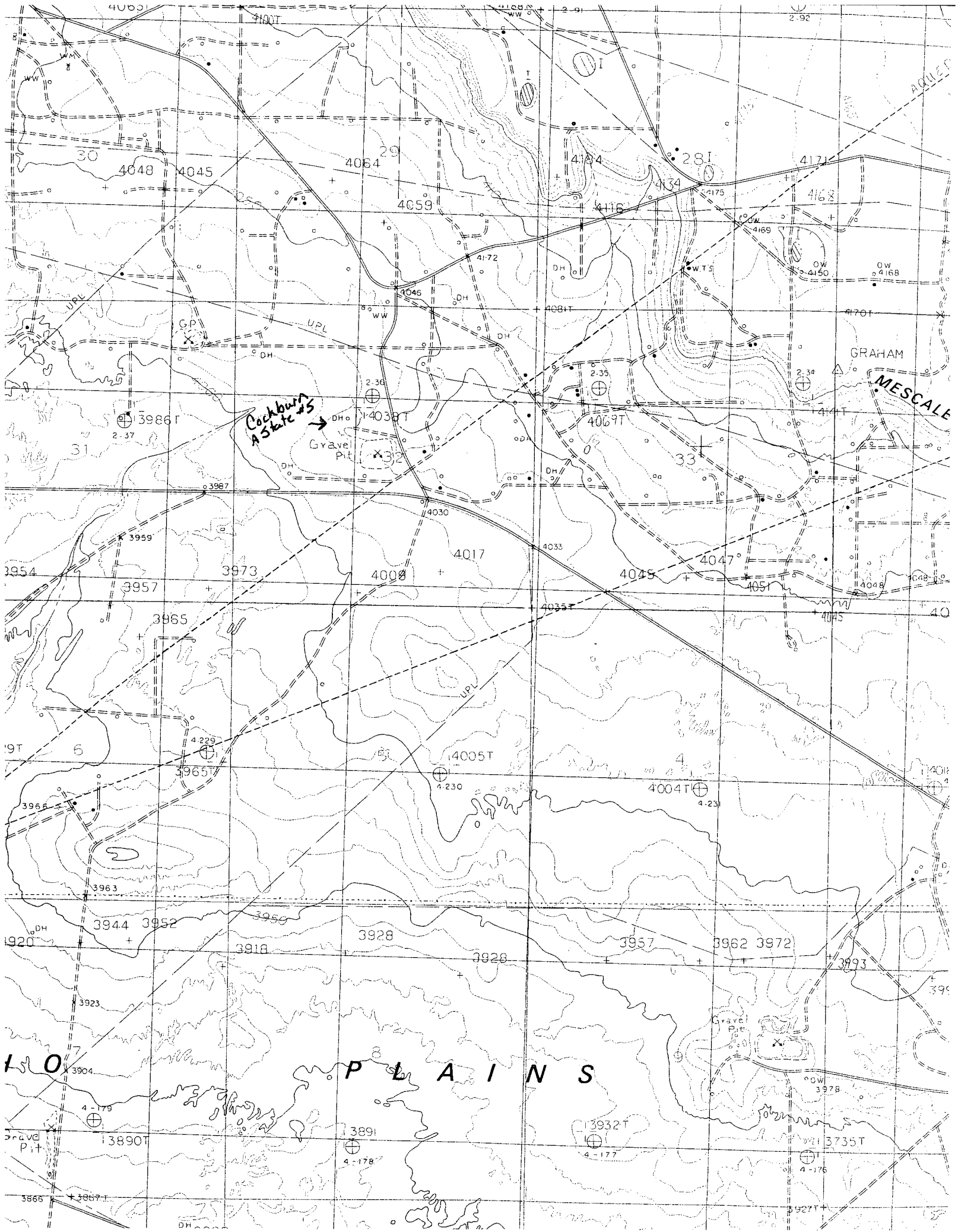
Date: **4/6/04**

Printed Name/Title \_\_\_\_\_

Signature

*Paul J. Perry*





**C-101/C-144 DRILLING PIT REGISTRATION CODITIONS OF APPROVAL**

API number:	<b>30-025-25286</b>	<b>MACK ENERGY CORP</b>
OGRID:		Operator: <b>PO BOX 960</b>
		<b>ARTESIA NM 88211</b>
	Property:	<b>COCKBURN A STATE</b> #

surface	ULSTR:	<b>F</b>	<b>32</b>	<b>T</b>	<b>17S</b>	<b>R</b>	<b>33E</b>

<b>XXXXXX</b>	Pit must be lined with a minimum of a <b>12 mil</b> re-enforced or <b>20 mil</b> re-enforced liner.
<b>XXXXXX</b>	The pit must be deep enough so that when pit is closed it can be covered with 3 feet of dirt and surface leveled
<b>XXXXXX</b>	If the pit is to be encapsulated in place, the liner is to be a minimum thickness of <b>20 mil</b> re-enforced liner
	When using a <b>12 mil</b> nylon re-enforced liner. The contents of the pit must be removed along with the liner and disposed of in an approved facility within 6 months of completion of the well.
<b>XXXXXX</b>	When using a <b>20 mil</b> liner. The pit must be closed within 6 months of completion of the well.
	This site has a <b>Ranking Score of 20 points or higher.</b> The contents of the pit must be removed along with the liner and disposed of in an approved facility within 6 months of completion of the well.
<b>XXXXXX</b>	Before pit is closed, submit a subsequent Form C-144 along with any additional information which may be applicable to the appropriate NMOCD District Office for approval.
<b>XXXXXX</b>	Notify appropriate NMOCD District Office by E-mail 48 hrs prior to closing pit.
<b>XXXXXX</b>	The operator is required to comply with NMOCD guidelines.
<b>XXXXXX</b>	OCD approval does not release the operator of its responsibilities for compliance with any other federal, state, or local laws and/or regulations.

**Drilling Pit Registration Approval**

District Supervisor Chris Williams  
District Geologist Paul F Kautz

505-393-6161

ext 102

ext 104

**Drilling Pit closure**

Environmental Spec Larry Johnson  
Environmental Spec Paul Sheeley

505-393-6161

ext 111 [lwjohnson@state.nm.us](mailto:lwjohnson@state.nm.us)

ext 113 [psheeley@state.nm.us](mailto:psheeley@state.nm.us)