HOBBSC ,

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

HOBES OCT State of New Mexico OCT 3 1 2011 Energy Minerals and Natural Resources

Form C-144 CLEZ

July 21, 2008

OCT 13 2011 Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505

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	d steel tanks or haul-off i	bins∕and propose to impl	<u>ement waste removal for closure, </u>
			<i>j</i>

Type of action: X 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				
Operator XTO Energy, Inc OGRID #: OGRID #:				
Address: 200 N. Loraine, Suite 800, Midland, TX 79701				
Facility or well name: Eunice Monument South Unit #172WIW				
API Number: 30-025-29912 OCD Permit Number: 605380 P - D3804				
U/L or Qtr/QtrO Section 31 Township 20S Range 37E County: Lea				
Center of Proposed Design: Latitude Longitude NAD: 1927 1983				
Surface Owner: Federal X State Tribal Trust or Indian Allotment				
2				
X 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				
X Above Ground Steel Tanks or Haul-off Bins				
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:				
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 indentify 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 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)				
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 G of 19.15.17.13 NMAC Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC				
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): Sharon Hindman / Title: Regulatory Analyst				
Signature Date: 07/12/2011				
e-mail address: sharon hindman@xtoenergy.com Telephone: 432-620-6741				

OCD Approval: Permit Application (including closure plan)	Closure Plan (only)		
OCD Representative Signature:	Approval Date:		
Title: STAFF MAN	OCD Permit Number: P1 - 23804		
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.			
	X Closure Completion Date: 10/14/2011		
Closure Report Regarding Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only: Instructions: Please indentify 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: CRI Disposal Facility Permit Number: NMO1 0006			
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): Sharon Hindman	Title: Regulatory Analyst		
Signature:	Date: 10/28/2011		
e-mail address: sharon-hindman@xtoenergy.com Telephone: 432 620-6741			

ECG 11-9-2011



Closure Report

Solids and Fluids were removed from steel tanks and hauled off by trucking companies and taken to.

Disposal Facility Name:

CRI

Disposal Facility Permit Number: NM-01-0006

Operating and Maintenance Procedure:

 Will submit C-144 (short form) to OCD to get permit to set steel tank at well location to be used to collect fluid during workover.

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- When permit received from OCD, steel tank will be set at well location prior to work performed (without any type of liner).
- Operator will do daily visual tank inspection to locate any leak that might cause soil or ground water contamination.
- If leak is detected the OCD will be notified immediately.

Closure Plan - based upon the appropriate requirements of Subsection C:

Solids and Fluids will be removed from steel tanks and hauled off by trucking companies. They will then be taken to the closest approved public disposal: See C-144 Form – (CRI – Disposal Facility Permit No. NM-01-0006)