HOBBS OCD

State of New Mexico

Energy Minerals and Natural Resources

Department

For closed-loop systems that only use above

1000 Rio Brazos Road, Aztec, NM 87410 1220 S. St. Francis Dr., Santa Fe, NM 87505

1625 N French Dr., Hobbs, NM 88240

811 S. First St., Artesia, NM 88210

District I

District II

RECEIVED

Oil 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.

Form C-144 CLEZ

Revised August 1, 2011

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: X Permit \(\subseteq \text{Closure} \)

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: __Texland Petroleum-Hobbs, LLC______OGRID #: ___113315______ Address: 777 Main Street, Suite 3200, Fort Worth, Texas 76102 Facility or well name: RLF Trust 25 #1H U/L or Qtr/Qtr ___ A ___ Section __25 ___ Township __16S ___ Range __38E __ County: __ Lea Longitude 103.092572' W NAD: X 1927 1983 Center of Proposed Design: Latitude 32.897877' N Surface Owner: ☐ Federal ☐ State ☐ Private ☐ Tribal Trust or Indian Allotment 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 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 19.15.16.8 NMAC 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: API Number: Previously Approved Operating and Maintenance Plan 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: __Sundance Services _____ Disposal Facility Permit Number: __NM01-0003 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) \(\subseteq \text{No} \) 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 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): Vickie Smith Title: ____Regulatory Analyst_____ Date: 8/23/11

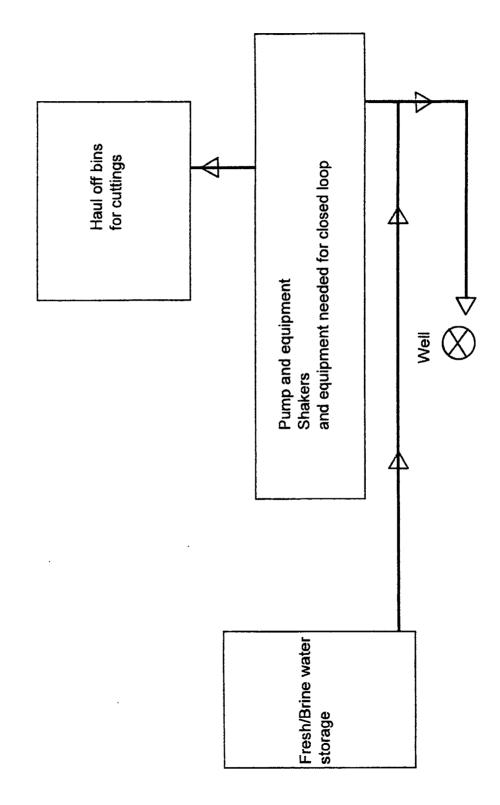
Telephone: ___575-397-7450_____ _vsmith@texpetro.com____ e-mail address:

Form C-144 CLTZ

Oil Conservation Division

OCD Approval: Permit Application (including elegate plan) Closure Plan (only)	
OCD Representative Signature:	Approval Date: 12/20/17
Title:	OCD Permit Number: PJ-D4D25
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:
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:	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	
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

CLOSED-LOOP SYSTEM DESIGN AND CONSTRUCTION



Closed Loop Design Plan

EQUIPMENT:

- 2 250 bbl tanks for holding fluids
- 2 solids bins with track system
- 1-500 bbls tank for fresh water
- 1 500 bbls tank for brine water

OPERATION AND MAINTENANCE:

System will be maintained 24 hours by solids control personnel that will stay on location.

Any and all leaks will be repaired and or contained immediately. OCD will be notified within 48 hours of remediation process started. Will adhere to Rule 116.

CLOSURE PLAN:

During drilling operations, all cutting, drill solids, drill fluids and all liquids will be hauled off by Closed Loop Specialties to Sundance Services, Eunice, NM (NM 01-0003).

GROUNDWATER:

Per OCD information and State Engineer data, the groundwater occurs at an average depth of 100'.

Exhibit F RLF Trust as +1H Taland Patholeom - Houses, LC East NORTON 100 以下のとと Road ontionce 130' K-7' offset クカートにえる