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District II 811 S. Fus. St. Artesia, NL 88210 District III 1000 Rus Bozos, Royal Actos, NM 87110	State of New Mexico Minerals and Natural Resources Department il Conservation Division 220 South St. Francis Dr Santa Fe, NM 87505	Form C-144 CI EZ Revised August 1, 2011 For closed-loop systems that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure, submit to the appropriate NMOCD District Office	
<u>Closed-Loop System Permit or Closure Plan Application</u> (that only use above ground steel tanks or haul-off buy and propose to implement waste removal for closure) Type of action 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 hability 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.			
OperatorLOR Operating Company	OGRID #	257420	
Address 200 × Loraine, STE 1440 M:dland, 1X 79701			
Facility or well name:Mrlnesand Unit # 152API Number30-041-00010		0.04227	
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Center of Proposed Design   Latitude		NAD [1927 ] 1983	
Surface Owner 🔲 Federal 🛄 State 🖾 Private 🛄 Tribal Trus	t or Indian Allotment		
<ul> <li><u>Closed-loop System</u>: Subsection H of 19151711 NMAC</li> <li>Operation Drilling a new welt Workover or Drilling (Applies to activities which require prior approval of a permit or notice of intent) P&amp;A</li> <li>Above Ground Steel Tanks or Haul-off Bins</li> </ul>			
Signs: Subsection C of 19/15/17/11 NMAC □ 12/x 24°, 2° lettering, providing Operston's name, site location, and emergency telephone numbers ⊠ Signed in compliance with 19/15/16.8 NMAC			
<ul> <li>Closed-loop Systems Permit Application Attachment Checklist: Subsection B of 1915 17.9 NMAC</li> <li>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.</li> <li>Design Plan - based upon the appropriate requirements of 1915 1711 NMAC</li> <li>Operating and Maintenance Plan - based upon the appropriate requirements of 1915.1712 NMAC</li> <li>Closure Plan (Please complete Box 5) - based upon the appropriate requirements of Subsection C of 1915 179 NMAC and 1915 1713 NMAC</li> </ul>			
Previously Approved Design (attach copy of design)	API Number		
Previously Approved Operating and Maintenance Plan	API Number	~	
5. <u>Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-oft Bins Only</u> : (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 NameGandy-Marley Disposal Location       Disposal Facility Permit Number			
Disposal Facility Name:CRF's Haltway Disposal Facility			
Disposal Facility Name:CRP's Haltway Disposal Facility Disposal Facility Permit NumberNM-01-0006 Will any of the proposed closed-loop system operations and associated activities occur on or in areas that <i>will not</i> be used for future service and operations? 			
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         Revegetation Plan - based upon the appropriate requirements of Subsection 1 of 19.15 17 13 NMAC         Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15 17 13 NMAC			
6 <u>Operator Application Certification</u> : 1 hereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief			
Name (Print) Jana True Signature ( <u>AAAB</u>	Date	01:20/2012	
e-mail address:			
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7     OCD Approval:     Permit Application (including closure plan)     Closure Plan (only)			
OCD Representative Signature: Maley Albrown Approval Date: 2/16/2012			
	Africe	Approval Date:	
Title: Compliance	, Officer	OCD Permit Number: <u>P1-04207</u>	
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:	
<sup>9</sup> <u>Closure Report Regarding Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only:</u> 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:			
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:			
Experience construct continuation. Thereby 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			
e-mail address		Felephone:	

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## OGRID# 257420 Form C-144 CLEZ attachment

Milnesand Unit Well #152 K-12-08S-34E API #30-041-00010 Roosevelt Co, NM

## Equipment & Design:

EOR Operating Company, Inc. will use a closed loop system in the drilling of this well. The system is designed to maintain all solids and fluids. The equipment is arranged to progressively remove solids from the largest to the smallest size. Drilling fluids can thus be reused and savings realized in disposal costs. The following equipment will be on location:

- 1. 500 bbl. "frac tank"
- 2. Cutting boxes
- 3. Reserve fluids

## **Operations & Maintenance:**

During each day of operation, the rig crews will inspect and closely monitor the fluids contained within the steel tanks and visually monitor any release that may occur. Should a release, spill or leak occur, the NM OCD District 1 office in Hobbs, NM will be notified @ 575-393-6161 as required in NM OCD's rune 19.15.29.8.

## Closure:

After drilling operations, fluids and solids will be hauled and disposed at:

- 1. Primary site Gandy-Marley Disposal location, Permit #NM 01-0019
- 2. Secondary site CRI's Halfway Disposal Facility, Permit #NM 01-0006