State of New Mexico

Energy Minerals and Natural Resources BBS OCD

Form C-144 CLEZ July 21, 2008

1301 W Grand Avenue, Artesia, NM 88ZIPP 0 2 2011 District III

1625 N French Dr., Hobbs, NM 88240

1000 Rio Brazos Road, Aztec, NM 87410

Department

· For closed-loop systems that only use above Oil Conservation Division

1220 South St. Francis Dr.

Of ground'steel tanks or haul-off bins and propose to implement waste removal for closure, submit to the appropriate NMOCD District Office.

1220 S St Francis Dr , Santa Fe, NM 8750 SRECEIVED. ...

Santa Fe, NM 87505

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: 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. APACHE CORPORATION OGRID #: 873					
Address: 303 VETERANS AIRPARK LN., STE. 3000 MIDLAND TEXAS 79705					
Facility or well name: EAST BLINEBRY DRINKARD UNIT #116					
API Number: 30-025- 40268 OCD Permit Number: P1-03671					
U/L or Qtr/Qtr 15 Section 1 Township 21 S Range 37 E County: LEA					
Center of Proposed Design Latitude 32.510603 N Longitude 103.113334 W NAD: 1927 1983					
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)					
☐ 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					
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. SUNDANCE INCORPORATED Disposal Facility Permit Number NM-01-0003					
Disposal Facility Name: SUNDANCE INCORPORATED Disposal Facility Permit Number: NM-01-0003 Disposal Facility Name: CRI Disposal Facility Permit Number: NM-01-0006					
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) 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): SORINA L. FLORES	Title	DRILLING TI	ECH III			
Signature Sourch Harry	Date:	JANUARY 21	<u>, 2010</u>			
e-mail address sorina.flores@apachecorp.com	Telephone:	432-818-1167	7	,		
OCD Approval: Permit Application (including closure plan) Closure Plan (only)						
OCD Representative Signature:		-	Appro	val Date: _ <i>09/06///</i>		
Title: PROPERTY ENGINEEP		OCD Permit Nu	mber:	P1-03671		
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: 12-27-201/						
Closure Report Regarding Waste Removal Closure For Closed-local Instructions: Please indentify the facility or facilities for where the latwo facilities were utilized. Disposal Facility Name: Disposal Facility Name: Were the closed-loop system operations and associated activities performance (If yes, please demonstrate compliance to the items below) Required for impacted areas which will not be used for future service of Site Reclamation (Photo Documentation) Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique	rmed on or in	ng fluids and drill Disposal Facility Disposal Facility a areas that will no	cuttings were Permit Numbe Permit Numbe	disposed. Use attachment if more than T:		
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): Vicki Brown		Title:	Drilling Ted	ch		
Signature. Vicke Brown		Date	1-3	-2012		
e-mail address:: vicki.brown@apachecorp.com		_ `Telephone: _	432-818-11	117		

ELG 2-21-2012



January 4, 2012

HOBBS OCD

JAN 0 6 2012

Oil Conservation Division ATTN: Donna Mull 1625 N French Dr Hobbs, NM 88240

RECEIVED

Dear Donna,

Please find enclosed the closure C-144 for the following wells:

EBDU #105

EBDU #116

If there are any questions or concerns on this matter, please call me at (432) 818-1117.

Thank you,

Vicki Brown
Drilling Tech II

Apache Corporation

303 Veterans Airpark Lane, Ste 3000

Midland, Texas 79705

(432) 818-1117 (Ofc)

(432) 238-2047 (Cell)

vicki.brown@apachecorp.com

STATES