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.

## 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 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: \_Ridgeway Arizona Oil Corp\_\_\_\_\_\_ OGRID:#:\_\_\_\_\_ 164557 Address: 200 N. Loraine, STE 1440 Midland, TX 79701 Facility or well name: \_\_\_Federal.24<sup>:</sup>#3.\_\_\_\_\_ U/L or Qtr/Qtr \_\_\_\_F \_\_\_ Section \_\_24 \_\_\_\_ Township \_\_07S \_\_\_\_\_ Range \_33E \_\_\_\_ County: \_\_\_Roosevelt \_\_\_\_\_ Center of Proposed Design: Latitude Surface Owner 🛛 Féderal 🗌 State 🗌 Private 🗌 Tribál Trust of Indian Allotment 2. Closed-loop System: Subsection H of 19.15.17.11; NMAC Operation: Drilling a new well D 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: Previously Approved Operating and Maintenance, Plan API Number: Waste Removal Closure For Closed-loop System's 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: \_\_\_\_\_Gandy Marly's Disposal Location \_\_\_\_\_\_ Disposal Facility Permit Number: \_\_\_\_\_NM-01-0019 Disposal Facility Name: \_\_\_CRI's Halfway Disposal Facility\_\_\_\_\_ 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) X 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 1 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): Jana True Title: \_\_\_\_Regulatory Mgr.\_\_\_\_\_ Signature: Date: \_\_\_\_\_\_3/21/12\_\_\_\_\_ Telephone: \_\_\_\_432-687-0303 e-mail address: jtruc@enhancedoilres.com

Form C-144 CLEZ

Oil Conservation Division

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7. <u>OCD Approva</u> l:  Permit Application (including closure, plan) [ Closure Plan (Bnly)	
OCD Representative Signature:	Approval Date: 3-22-2012
Title:STATE MARL	OCD Permit Number: 41-04346
8. <u>Closure Report (required within 60 days of closure completion)</u> : 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:	
9. <u>Closure Report Regarding Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks of 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:	Dispòsal 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)	
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. <u>Operator Closure Certification</u> : 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:
c-mail address:	Telephone:

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# Ogrid 164557 Form C-144 CLEZ attachment

Federal 24 #3 F-24-07S-33E API #30-041-10507 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

200 N. Loraine, STE 1440 Midland, TX 79701

> Tel: 432-687-0303 Fax: 432-687-0321