

District I
1625 N French Dr., Hobbs, NM 88240District II
811 S. First St., Artesia, NM 88210District III
1000 Rio Brazos Road, Aztec, NM 87410District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

JUN 27 2012

Energy Minerals and Natural Resources

Department

RECEIVED

Oil Conservation Division

1220 South St. Francis Dr.

Santa Fe, NM 87505

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: ☒ 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.

1. Operator: Occidental Permian Ltd. OGRID #: 157984
 Address: P.O. Box 4294, Houston, TX 77210-4294
 Facility or well name: South Hobbs G/SA Unit No. 201
 API Number: 30-025-29459 OCD Permit Number: PI-04837
 U/L or Qtr/Qtr H Section 6 Township 19-S Range 38-E County: Lea
 Center of Proposed Design: Latitude 32 41 24.3672 Longitude -103 10 55.4160 NAD: ☒ 1927 ☐ 1983
 Surface Owner: ☐ Federal ☒ State ☐ Private ☐ Tribal Trust or Indian Allotment

2. ☒ **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

3. **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

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: _____

5. **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 identify 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 Parabo Facility Disposal Facility Permit Number: NM-01003
 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) ☒ 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

6. **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): Mark Stephens Title: Reg. Comp. Analyst
 Signature: Mark Stephens Date: 6/27/12
 e-mail address: Mark.Stephens@oxy.com Telephone: (713) 366-5158

JUN 28 2012

7. **OCD Approval:** ☐ Permit Application (including closure plan) ☐ Closure Plan (only)

OCD Representative Signature: _____

Approval Date: 6-27-2012

Title: STAFF WTR

OCD Permit Number: P1-04837

8. **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: _____

9. **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

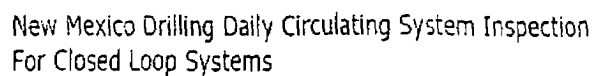
10. **Operator Closure Certification:**

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): _____ Title: _____

Signature: _____ Date: _____

e-mail address: _____ Telephone: _____



Wellname:	Permit #:	Rig Move Date:
County:		Rig Demobe Date:

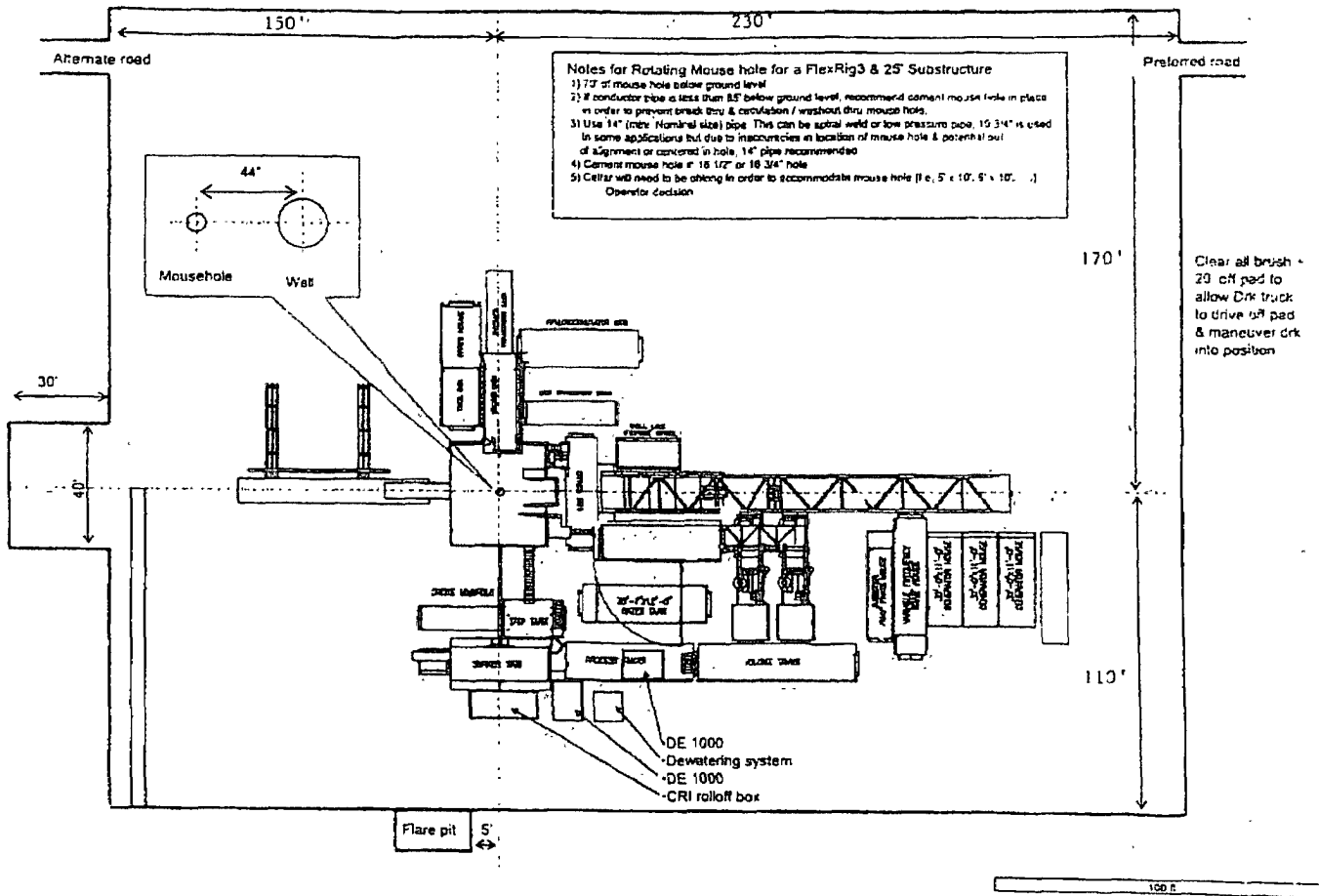
[illegible]

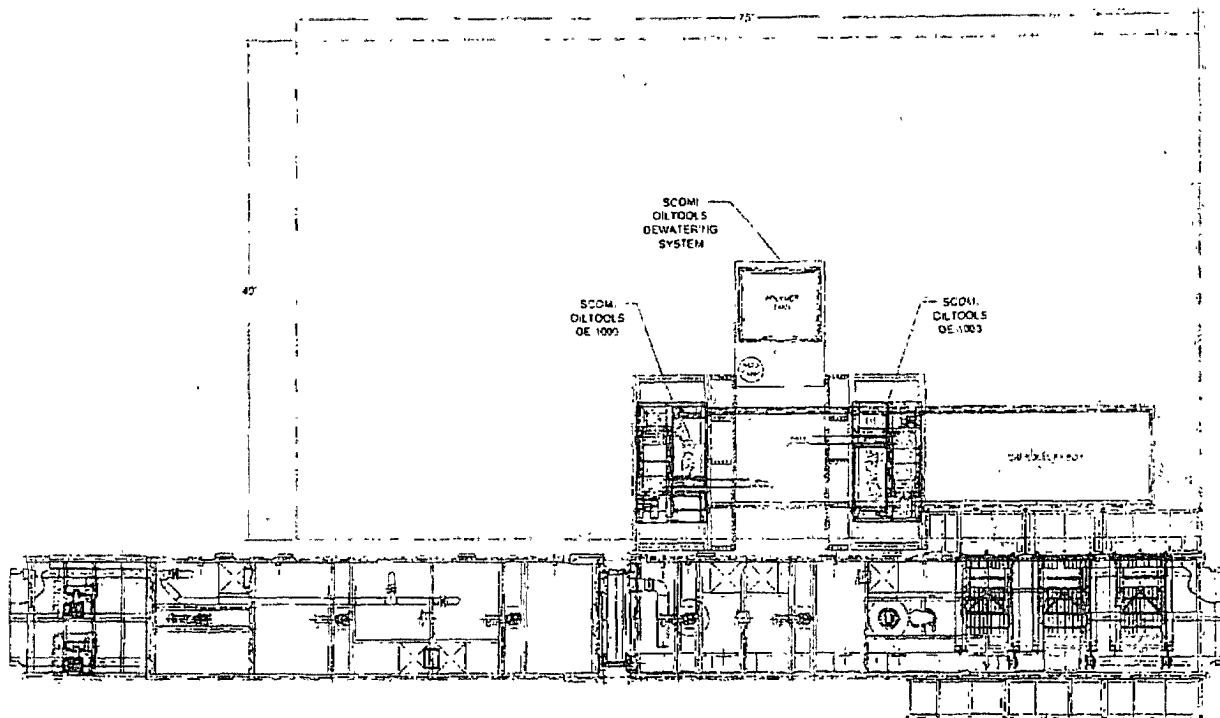
All circulating systems to be inspected **DAILY** during drilling operations.

*Any leak of the steel tanks, lines or pumps shall be reported to the NMOCD and repaired within 48 hours.

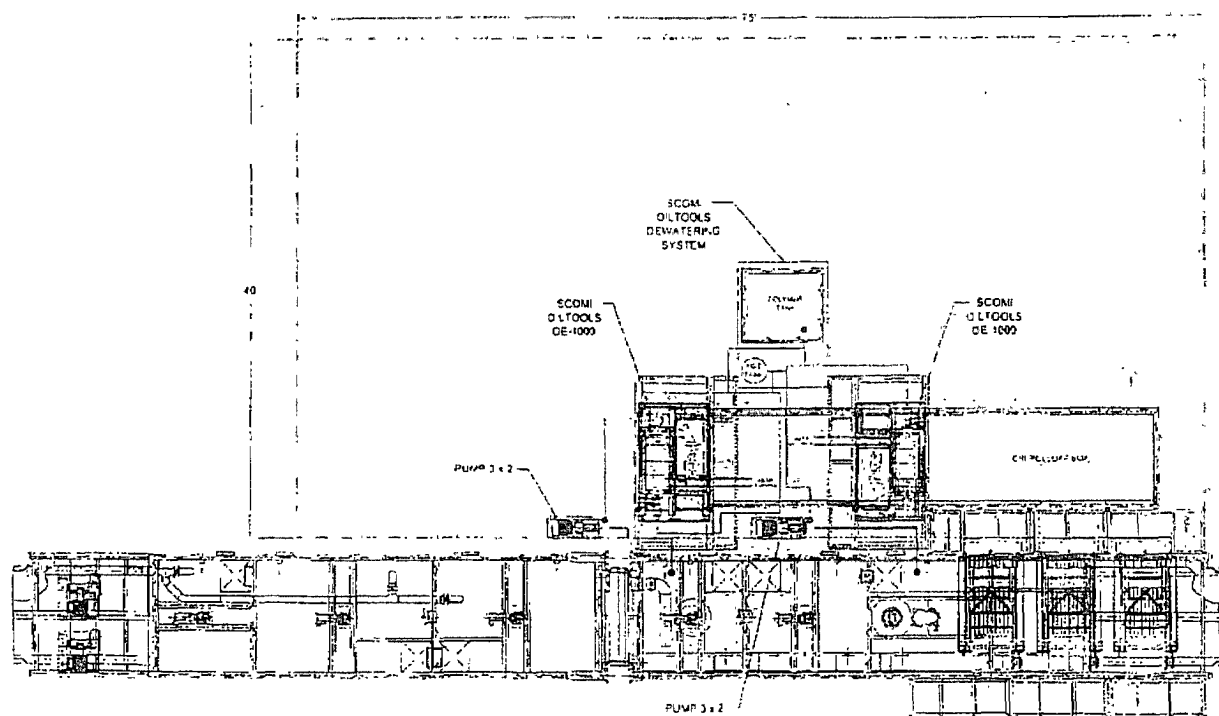
OXY FLEX III PAD (SCOM Closed Loop System)

Level Area-No Caliche-For Offices and Living Quarters





<p>1. All steel tanks, vessels, pipes and fittings shall be painted with a heavy coat of red lead paint.</p> <p>2. All steel tanks, vessels, pipes and fittings shall be painted with a heavy coat of red lead paint.</p> <p>3. All steel tanks, vessels, pipes and fittings shall be painted with a heavy coat of red lead paint.</p> <p>4. All steel tanks, vessels, pipes and fittings shall be painted with a heavy coat of red lead paint.</p> <p>5. All steel tanks, vessels, pipes and fittings shall be painted with a heavy coat of red lead paint.</p> <p>6. All steel tanks, vessels, pipes and fittings shall be painted with a heavy coat of red lead paint.</p> <p>7. All steel tanks, vessels, pipes and fittings shall be painted with a heavy coat of red lead paint.</p> <p>8. All steel tanks, vessels, pipes and fittings shall be painted with a heavy coat of red lead paint.</p> <p>9. All steel tanks, vessels, pipes and fittings shall be painted with a heavy coat of red lead paint.</p> <p>10. All steel tanks, vessels, pipes and fittings shall be painted with a heavy coat of red lead paint.</p>	<p>1. All steel tanks, vessels, pipes and fittings shall be painted with a heavy coat of red lead paint.</p> <p>2. All steel tanks, vessels, pipes and fittings shall be painted with a heavy coat of red lead paint.</p> <p>3. All steel tanks, vessels, pipes and fittings shall be painted with a heavy coat of red lead paint.</p> <p>4. All steel tanks, vessels, pipes and fittings shall be painted with a heavy coat of red lead paint.</p> <p>5. All steel tanks, vessels, pipes and fittings shall be painted with a heavy coat of red lead paint.</p> <p>6. All steel tanks, vessels, pipes and fittings shall be painted with a heavy coat of red lead paint.</p> <p>7. All steel tanks, vessels, pipes and fittings shall be painted with a heavy coat of red lead paint.</p> <p>8. All steel tanks, vessels, pipes and fittings shall be painted with a heavy coat of red lead paint.</p> <p>9. All steel tanks, vessels, pipes and fittings shall be painted with a heavy coat of red lead paint.</p> <p>10. All steel tanks, vessels, pipes and fittings shall be painted with a heavy coat of red lead paint.</p>	<p>CLOSED LOOP SYSTEM BASIC LAYOUT AND TIE IN OXY MAP FLEX HIGS PG 1 OF 2</p>	<p>Scomi</p> <p>5215-014</p>
--	--	--	-------------------------------------



<div>REVISIONS</div> <table><tr><th>NO.</th><th>DESCRIPTION</th><th>DATE</th></tr><tr><td>1</td><td>ISSUED FOR CONSTRUCTION</td><td>10/1/80</td></tr></table>	NO.	DESCRIPTION	DATE	1	ISSUED FOR CONSTRUCTION	10/1/80	<div>NOTES</div> <ol style="list-style-type: none">1. ALL MATERIALS SHALL BE AS SPECIFIED IN THE MATERIAL SPECIFICATIONS.2. ALL WELDING SHALL BE DONE IN ACCORDANCE WITH THE WELDING SPECIFICATIONS.3. ALL EQUIPMENT SHALL BE INSTALLED IN ACCORDANCE WITH THE EQUIPMENT SPECIFICATIONS.4. ALL PIPING SHALL BE INSTALLED IN ACCORDANCE WITH THE PIPING SPECIFICATIONS.5. ALL ELECTRICAL WORK SHALL BE DONE IN ACCORDANCE WITH THE ELECTRICAL SPECIFICATIONS.	<div>CLOSED LOOP SYSTEM BASIC LAYOUT AND TIE IN OXY MAP - FLEX RIGS / PG 2 OF 2</div>	<div>Scomi</div> <div>52-S-014</div>
NO.	DESCRIPTION	DATE							
1	ISSUED FOR CONSTRUCTION	10/1/80							