1625 N/French Dr., Hobbs, NM 8 <u>District II</u> 811 S. First St., Artesia, NM 8821 <u>District III</u> 1000 Rio Brazos Road, Aztec, NM <u>District IV</u> 1220 S. St. Francis Dr., Santa Fe,	NM 87505	State of New Mexico Energy Minerals and Natural Resources Department 0 20\@il 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 propos to implement waste removal for closure, submit to the appropriate NMOCD District Office.
	<u>ise above ground stee</u>	System Permit or Closure Plan <i>el tanks or haul-off bins and propose to impli</i> Type of action. X Permit Closure	ement waste removal for closure)
closed-loop system that only us lease be advised that approval of	<i>ise above ground steel ta</i> f this request does not rel	lieve the operator of liability should operations resul	ste removal for closure, please submit a Form C-144.
1.	• • •		
		OGRID #:	217817
Address: <u>P. O. Box 51810 N</u>			
		t Tract 017-02	
API Number: <u>30-025-20864</u>			
		Township <u>17S</u> Range <u>35E</u>	
			NAD: []1927 [] 1983
Surface Owner: 🗌 Federal 🛛] State 🗌 Private 🗌 T	ribal Trust or Indian Allotment	
12"x 24", 2" lettering, prov	viding Operator's name	, site location, and emergency telephone numbers	
Signed in compliance with	19.15.16.8 NMAC		S
Closed-loop Systems Permit Instructions: Each of the fold attached. Design Plan - based upo Operating and Maintena Closure Plan (Please co Previously Approved Desi	Application Attachme lowing items must be a on the appropriate requi ance Plan - based upon omplete Box 5) - based ign (attach copy of desi	ent <u>Checklist</u> : Subsection B of 19.15.17.9 NMA <i>ittached to the application. Please indicate, by a</i> irements of 19.15.17.11 NMAC the appropriate requirements of 19.15.17.12 NMA upon the appropriate requirements of Subsection	AC check mark in the box, that the documents are AC C of 19.15.17.9 NMAC and 19.15.17.13 NMAC
Closed-loop Systems Permit Instructions: Each of the fold attached. Design Plan - based upo Operating and Maintena Closure Plan (Please co Previously Approved Desi Previously Approved Ope 5. Waste Removal Closure For	Application Attachme lowing items must be a on the appropriate requi ance Plan - based upon omplete Box 5) - based ign (attach copy of desi erating and Maintenance Closed-loop Systems	ent Checklist: Subsection B of 19.15.17.9 NMA attached to the application. Please indicate, by a irements of 19.15.17.11 NMAC the appropriate requirements of 19.15.17.12 NM. upon the appropriate requirements of Subsection gn) API Number:	AC <i>check mark in the box, that the documents are</i> AC C of 19.15.17.9 NMAC and 19.15.17.13 NMAC
Closed-loop Systems Permit Instructions: Each of the fold attached. Design Plan - based upo Operating and Maintena Closure Plan (Please co Previously Approved Desi Previously Approved Ope 5. Waste Removal Closure For	Application Attachme lowing items must be a on the appropriate requi ance Plan - based upon omplete Box 5) - based ign (attach copy of desi erating and Maintenance Closed-loop Systems	ent Checklist: Subsection B of 19.15.17.9 NMA attached to the application. Please indicate, by a irements of 19.15.17.11 NMAC the appropriate requirements of 19.15.17.12 NM. upon the appropriate requirements of Subsection gn) API Number:	AC <i>check mark in the box, that the documents are</i> AC C of 19.15.17.9 NMAC and 19.15.17.13 NMAC
Closed-loop Systems Permit Instructions: Each of the fold attached. Design Plan - based upo Operating and Maintena Closure Plan (Please co Previously Approved Desi Previously Approved Ope 5. Waste Removal Closure For Instructions: Please indentify	Application Attachme lowing items must be a on the appropriate requi ance Plan - based upon omplete Box 5) - based u ign (attach copy of desi erating and Maintenance Closed-loop Systems by the facility or facilitie	ent Checklist: Subsection B of 19.15.17.9 NMA intached to the application. Please indicate, by a irements of 19.15.17.11 NMAC the appropriate requirements of 19.15.17.12 NMA upon the appropriate requirements of Subsection gn) API Number: Plan API Number: That Utilize Above Ground Steel Tanks or Ha es for the disposal of liquids, drilling fluids and o	AC <i>check mark in the box, that the documents are</i> AC C of 19.15.17.9 NMAC and 19.15.17.13 NMAC
Closed-loop Systems Permit Instructions: Each of the fold attached. Design Plan - based upp Operating and Maintena Closure Plan (Please co Previously Approved Desi Previously Approved Ope S. Waste Removal Closure For Instructions: Please indentify facilities are required.	Application Attachme lowing items must be a on the appropriate requi ance Plan - based upon omplete Box 5) - based ign (attach copy of desi erating and Maintenance Closed-loop Systems by the facility or facilitie 360	ent Checklist: Subsection B of 19.15.17.9 NMA attached to the application. Please indicate, by a irements of 19.15.17.11 NMAC the appropriate requirements of 19.15.17.12 NMA upon the appropriate requirements of Subsection gn) API Number:	AC check mark in the box, that the documents are AC C of 19.15.17.9 NMAC and 19.15.17.13 NMAC ul-off Bins Only: (19.15.17.13.D NMAC) drill cuttings. Use attachment if more than two Permit Number:NM-01-0006
Closed-loop Systems Permit Instructions: Each of the fold attached. Design Plan - based upp Operating and Maintena Closure Plan (Please co Previously Approved Desi Previously Approved Ope S. Waste Removal Closure For Instructions: Please indentify facilities are required. Disposal Facility Name: Disposal Facility Name:	Application Attachme lowing items must be a on the appropriate requi ance Plan - based upon omplete Box 5) - based i ign (attach copy of desi erating and Maintenance Closed-loop Systems by the facility or facilitie 360	ent Checklist: Subsection B of 19.15.17.9 NMA intached to the application. Please indicate, by a irements of 19.15.17.11 NMAC the appropriate requirements of 19.15.17.12 NM, upon the appropriate requirements of Subsection gn) API Number: 	AC a check mark in the box, that the documents are AC C of 19.15.17.9 NMAC and 19.15.17.13 NMAC <u>ul-off Bins Only</u> : (19.15.17.13.D NMAC) drill cuttings. Use attachment if more than two Permit Number:
	Application Attachme lowing items must be a on the appropriate requi ance Plan - based upon omplete Box 5) - based upon ign (attach copy of desi erating and Maintenance Closed-loop Systems by the facility or facilitie 360 ed-loop system operatio vide the information below which will not be used for Design Specifications used upon the appropriat	ent Checklist: Subsection B of 19.15.17.9 NMA intached to the application. Please indicate, by a irements of 19.15.17.11 NMAC the appropriate requirements of 19.15.17.12 NM, upon the appropriate requirements of Subsection gn) API Number: 	AC check mark in the box, that the documents are AC C of 19.15.17.9 NMAC and 19.15.17.13 NMAC
4. Closed-loop Systems Permit Instructions: Each of the fold attached. Design Plan - based upo Closure Plan (Please colspan="2">Operating and Maintena Previously Approved Desi Previously Approved Ope 5. Waste Removal Closure For Instructions: Please indentify facilities are required. Disposal Facility Name: Disposal Facility Name: Will any of the proposed close Yes (If yes, please prov Required for impacted areas w Soil Backfill and Cover Stie Reclamation Plan - bas Site Reclamation Plan - bas Site Reclamation Plan - bas Site Reclamation Plan - bas 6. Operator Application Certification Cert	Application Attachme lowing items must be a on the appropriate requi ance Plan - based upon omplete Box 5) - based i ign (attach copy of desi erating and Maintenance Closed-loop Systems by the facility or facilitie 360 ed-loop system operation vide the information below which will not be used for Design Specifications used upon the appropriate based upon the appropriate	ent Checklist: Subsection B of 19.15.17.9 NMA intrached to the application. Please indicate, by a irements of 19.15.17.11 NMAC the appropriate requirements of 19.15.17.12 NMA upon the appropriate requirements of Subsection gn) API Number:	AC check mark in the box, that the documents are AC C of 19.15.17.9 NMAC and 19.15.17.13 NMAC <u>ul-off Bins Only</u> : (19.15.17.13.D NMAC) drill cuttings. Use attachment if more than two Permit Number:
4. Closed-loop Systems Permit Instructions: Each of the fold attached. Design Plan - based upo Operating and Maintena Closure Plan (Please co Previously Approved Desi Previously Approved Ope 5. Waste Removal Closure For Instructions: Please indentify facilities are required. Disposal Facility Name: Disposal Facility Name: Will any of the proposed close Yes (If yes, please prov Required for impacted areas w Soil Backfill and Cover Re-vegetation Plan - bas Site Reclamation Plan - bas Site Reclamation Plan - bas I hereby certify that the inform 	Application Attachme lowing items must be a on the appropriate requi ance Plan - based upon omplete Box 5) - based upon ign (attach copy of desi erating and Maintenance Closed-loop Systems by the facility or facilitie 360 ed-loop system operation vide the information below which will not be used for Design Specifications used upon the appropriate based upon the appropriate based upon the appropriate mation submitted with t	ent Checklist: Subsection B of 19.15.17.9 NMA attached to the application. Please indicate, by a irements of 19.15.17.11 NMAC the appropriate requirements of 19.15.17.12 NM. upon the appropriate requirements of Subsection gn) API Number: e Plan API Number: That Utilize Above Ground Steel Tanks or Ha gs for the disposal of liquids, drilling fluids and d mission and associated activities occur on or in areas to ow) No bir future service and operations: - based upon the appropriate requirements of Subsection 1 of 19.15.17.13 NM riate requirements of Subsection 1 of 19.15.17.13 NM riate requirements of Subsection G of 19.15.17.13 NM	AC check mark in the box, that the documents are AC C of 19.15.17.9 NMAC and 19.15.17.13 NMAC <u>ul-off Bins Only</u> : (19.15.17.13.D NMAC) drill cuttings. Use attachment if more than two Permit Number: <u>NM-01-0006</u> Permit Number: <u>NM-01-0006</u> Permit Number: <u>hat will not be used for future service and operation</u> ubsection H of 19.15.17.13 NMAC MAC 3 NMAC the best of my knowledge and belief.
4. Closed-loop Systems Permit Instructions: Each of the fold attached. Design Plan - based upo Closure Plan (Please colspan="2">Operating and Maintena Previously Approved Desi Previously Approved Ope 5. Waste Removal Closure For Instructions: Please indentify facilities are required. Disposal Facility Name: Disposal Facility Name: Will any of the proposed close Yes (If yes, please prov Required for impacted areas w Soil Backfill and Cover Stie Reclamation Plan - bas Site Reclamation Plan - bas Site Reclamation Plan - bas Site Reclamation Plan - bas 6. Operator Application Certification Cert	Application Attachme lowing items must be a on the appropriate requi ance Plan - based upon omplete Box 5) - based upon ign (attach copy of desi erating and Maintenance Closed-loop Systems by the facility or facilitie 360 ed-loop system operation vide the information below which will not be used for Design Specifications used upon the appropriate based upon the appropriate based upon the appropriate mation submitted with t	ent Checklist: Subsection B of 19.15.17.9 NMA attached to the application. Please indicate, by a irements of 19.15.17.11 NMAC the appropriate requirements of 19.15.17.12 NM. upon the appropriate requirements of Subsection gn) API Number: e Plan API Number: That Utilize Above Ground Steel Tanks or Ha gs for the disposal of liquids, drilling fluids and d mission and associated activities occur on or in areas to ow) No bir future service and operations: - based upon the appropriate requirements of Subsection 1 of 19.15.17.13 NM riate requirements of Subsection 1 of 19.15.17.13 NM riate requirements of Subsection G of 19.15.17.13 NM	AC check mark in the box, that the documents are AC C of 19.15.17.9 NMAC and 19.15.17.13 NMAC <u>ul-off Bins Only</u> : (19.15.17.13.D NMAC) drill cuttings. Use attachment if more than two Permit Number:
4. Closed-loop Systems Permit Instructions: Each of the fold attached. Design Plan - based upo Operating and Maintena Closure Plan (Please co Previously Approved Desi Previously Approved Ope 5. Waste Removal Closure For Instructions: Please indentify facilities are required. Disposal Facility Name: Disposal Facility Name: Will any of the proposed close Yes (If yes, please prov Required for impacted areas w Soil Backfill and Cover Re-vegetation Plan - bas Site Reclamation Plan - bas Site Reclamation Plan - bas I hereby certify that the inform 	Application Attachme lowing items must be a on the appropriate requi ance Plan - based upon omplete Box 5) - based upon ign (attach copy of desi erating and Maintenance Closed-loop Systems by the facility or facilitie 360 ed-loop system operation vide the information below which will not be used for Design Specifications used upon the appropriate based upon the appropriate based upon the appropriate mation submitted with t	ent Checklist: Subsection B of 19.15.17.9 NMA itrached to the application. Please indicate, by a irements of 19.15.17.11 NMAC the appropriate requirements of 19.15.17.12 NM. upon the appropriate requirements of Subsection gn) API Number:	AC check mark in the box, that the documents are AC C of 19.15.17.9 NMAC and 19.15.17.13 NMAC <u>ul-off Bins Only</u> : (19.15.17.13.D NMAC) drill cuttings. Use attachment if more than two Permit Number:
A. Closed-loop Systems Permit Instructions: Each of the fold attached. Design Plan - based upo Operating and Maintena Coperating and Maintena Previously Approved Desi Previously Approved Ope Freviously Approved Ope Terviously Approved Ope Tervio	Application Attachme lowing items must be a on the appropriate requi ance Plan - based upon omplete Box 5) - based of ign (attach copy of desi erating and Maintenance Closed-loop Systems by the facility or facilitie 360 ed-loop system operation vide the information below which will not be used for Design Specifications used upon the appropriate based upon the appropriate based upon the appropriate construction submitted with the ers	ent Checklist: Subsection B of 19.15.17.9 NMA attached to the application. Please indicate, by a irements of 19.15.17.11 NMAC the appropriate requirements of 19.15.17.12 NM. upon the appropriate requirements of Subsection gn) API Number:	AC check mark in the box, that the documents are AC C of 19.15.17.9 NMAC and 19.15.17.13 NMAC <u>ul-off Bins Only</u> : (19.15.17.13.D NMAC) drill cuttings. Use attachment if more than two Permit Number:

7. OCD Approval: Permit Application (including closure plan) Closure P	lan (only) FOR RECORD ONLY ECG 7-31-2013			
OCD Representative Signature:	Approval Date:			
Title:	OCD Permit Number:			
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:				
". <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:	Disposal Facility Permit Number:			
Were the closed-loop system operations and associated activities performed on or in areas that <i>will not</i> 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): <u>Rhonda Rogers</u>	Title: Staff Regulatory Technician			
Signature:	Date:			
e-mail address: rogerrs@conocophillips.com	Telephone:(432)688-9174			

Closed Loop System Design, Operating and Maintenance, and Closure Plan

ConocoPhillips Company Well: VGEU 017-02 Location: Sec. 31, T17S, R35E Date 07/23/2013

ConocoPhillips proposes the following plan for design, operating and maintenance, and closure of our proposed closed loop system for the above named well:

1. We propose to use a closed loop system with steel pits, haul-off bins, and frac tanks for containing all cuttings, solids, mud, water, brine, and liquids. We will not dig a pit, nor will we use a drying pad, nor will we build an earth pit above ground level, nor will we dispose of or bury any waste on location.

All drilling waste and all drilling fluids (fresh water, brine, mud, cuttings, drill solids, cement returns, and any other liquid or solid that may be involved) will be contained on location in the rig's steel pits or in hauloff bins or in frac tanks as needed. The intent is as follows:

- We propose to use the rig's steel pits for containing and maintaining the drilling fluids.
- We propose to remove cuttings and drilled solids from the mud by using solids control equipment and to contain such cuttings and drilled solids on location in haul-off bins.
- We propose that any excess water that may need to be stored on location will be stored in tanks.

The closed loop system components will be inspected daily by each tour and any need repairs will be made immediately. Any leak in the system will be repaired immediately, and any spilled liquids and/or solids will be cleaned immediately, and the area where any such spill occurred will be remediated immediately.

2. Cuttings and solids will be removed from location in haul-off bins by an authorized contractor and disposed of at an authorized facility. For this well, we propose the following disposal facility:

R-360 Inc. 4507 West Carlsbad Hwy, Hobbs, NM 88240, P.O. Box 388; Hobbs, New Mexico 88241 Toll Free Phone: 877.505.4274, Local Phone Number: 432.638.4076

The physical address for the plant where the disposal facility is located is Highway 62/180 at mile marker 66 (33 miles East of Hobbs, NM and 32 miles West of Carlsbad, NM).

The Permit Number for R-360 is NM-01-0006.

A photograph showing the type of haul-off bins that will be used is attached.

- 3. Mud will be transported by vacuum truck and disposed of at R-360 Inc at the facility described above.
- 4. Fresh Water and Brine will be hauled off by vacuum truck and disposed of at an authorized salt water disposal well. We propose the following for disposal of fresh water and brine as needed:
 - Nabors Well Services Company, 3221 NW County Rd; Hobbs, NM 88240, PO 5208 Hobbs, NM, 88241, Permit SWD 092. (Well Location: Section 3, T19S R37E)
 - Basic Energy Services, P.O. Box 1869; Eunice, NM 88231 Phone Number: 575.394.2545, Facility located at Hwy 18, Mile Marker 19; Eunice, NM.

James Chen Drilling Engineer Office: 832.486.2184 Cell: 832.678.1647