District J 1625 N. French Dr., Hobbs, NM 88240 District II 811 S. First St., Artesia, NM 88210 District III 1000 Rio Brazós Road, Ažtec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	UG 2222013	State of New Mex y Minerals and Natura Department Oil Conservation Di 1220 South St. Franc Santa Fe, NM 875	l Resources vision g vis Dr. tu	round steel tanks or.	Form C-144 CLEZ. Revised August 1, 2011 ms that only use above haut-off bins and propose moval for closure, submit OCD District Office.
<u>Clos</u>	ed-Loop Sys	tem Permit or Clo	sure Plan A	oplication	
(that only use above g	-	or haul-off bins and pro		t waste removal for	· closure)
Instructions: Please submit one application	••	e of action: X Permit		ar ann annliantan ia	wast other than for a
closed-loop system that only use above gro	ound steel tanks or h	aul-off bins and propose to	implement waste ren	ioval for closure, plea	se submit a Form C-144.
Please be advised that approval of this reques environment. Nor does approval relieve the o	t does not relieve the operator of its respon	operator of liability should o sibility to comply with any o	perations result in pe her applicable gover	ellution of surface wate amontal authority's rul	er, ground water or the es, regulations or ordinances.
Operator: Chevron USA, Inc.			OGRID #:43	23	
Address: 15 Smith Road Midland, TX					
Facility or well name: LIMESTONE 1.	7 ··· ··· <u>··</u> · ··· ··· ··· ···	<u>ــــــــــــــــــــــــــــــــــــ</u>			
	360	OCD Permit	Number: FOR	RECORD	ONLY
U/L or Qtr/Qtr D Section				ounty: LEA	
Center of Proposed Design: Latitude 3			103.549098	N	IAD: 🛛 1927 🗌 1983
Surface Owner: 🛛 Federal 🗌 State 🗌 P	rivate [_] Iribal Iri	ist or Indian Allotment			
Operation: X Drilling a new well VG Above Ground Steel Tanks or X Hau Bigns: Subsection C of 19:15.17.11 NM 12"x 24"; 2" lettering, providing Opera X Signed in compliance with 19.15.16.8	Il-off Bins AC ator ⁱ s name, site loc			val of a permit or not	ice of intent) [] P&A
4. Closed-loop Systems Permit Application		klist: Subsection B of 19 to the application. Please		mark in the box, th	at the documents are
Instructions: Each of the following item: attached. Image: Imag	based upon the appr	opriate requirements of 19.		9.15.17.9 NMAC ar	d 19.15.17.13 NMAC
attached. Design Plan - based upon the appro Operating and Maintenance Plan - l Closure Plan (Please complete Box Previously Approved Design (attach e	based upon the appr 5) - based upon the opy of design)	opriate requirements of 19. appropriate requirements of API Number:	of Subsection C of	9.15.17.9 NMAC ar	d 19.15.17.13 NMAC
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attached. attached. Image: Design Plan - based upon the approximate Plan (Please complete Box Image: Operating and Maintenance Plan - L Image: Operating and Maintenance Plan - L Image: Operating and Maintenance Plan - L Image: Operating and Maintenance Plan (Please complete Box Image: O	assed upon the appr 5) - based upon the opy of design) <u>Aaintenance Plan</u> <u>p Systems That Uf</u> <i>i or facilities for the</i> <u>DISPOSAL</u> em operations and a mation below) X	opriate requirements of 19. appropriate requirements of API-Number:	of Subsection C of Tanksor Haul-off g fluids and drill c. Ssal Facility Permit ssal Facility Permit	<u>Bins.Only</u> : (19.15.1 <i>ittings, Üse attachm</i> Number: <u>NM-01-</u> Number: <u>NM-01-</u>	7.13.D NMAC) ent if more than two 0006 0003
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7. OCD Approval: Permit Application (including closure plan) Closure	Plan (only)			
OCD Representative Signature:	Approval Date:			
Title:	Approval Date:			
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.				
9. <u>Closure Report Regarding Waste Removal Closure For Closed-loop System</u> Instructions: Please indentify the facility or facilities for where the liquids, dr. 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)				
Required for impacted areas which will not be used for future service and operation Site Reclamation (Photo Documentation) Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique	tions:			
 <u>Operator Closure Certification</u>: I hereby certify that the information and attachments submitted with this closure belief. I also certify that the closure complies with all applicable closure require 				
Name (Print):	Title:			
Signature:	Date:			
e-mail address:	Telephone:			

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Pumping Unit

Lease Road

BLM Site Security Statement

Closed Loop System

LIMESTONE 11 23 33 FED 1H Unit D, Sec. 11, T-23-S R-33-E Lea, Co., NM API# 30-025-

Plans are to use a closed loop system with roll off bins in the drilling of this well. Operator will maintain all liquids and solids within the closed loop system in a safe manner in order to protect public health and the environment.

Operations and Maintenance:

During each tour, the rig's crew will inspect and monitor the drilling fluids contained within the tank and monitor any spill which may occur. Should a spill, release or leak occur; the NMOCD District I office in Hobbs (575.393.6161) will be notified. Please note that notifications may be made earlier to the district office should a greater release occur in compliance with NMOCD's rules.

Closure:

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During and after drilling operations, any fluids and solids will be transported to Controlled Recovery, Inc. Permit # NM-01-0006.

The alternative disposal facility will be at Sundance Disposal. Permit # NM-01-0003.