

District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Avenue, Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy Minerals and Natural
Resources

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-144
June 1, 2004

For drilling and production facilities, submit
to appropriate NMOCD District Office.
For downstream facilities, submit to Santa Fe
office

Pit or Below-Grade Tank Registration or Closure

Is pit or below-grade tank covered by a "general plan"? Yes ☒ No ☐

Type of action: Registration of a pit or below-grade tank ☐ Closure of a pit or below-grade tank ☒

Operator: <u>Yates Petroleum Corporation</u> Telephone: <u>505-748-4500</u> e-mail address: <u>mikes@ypcnm.com</u>		
Address: <u>105 South 4th Street, Artesia, N.M. 88210</u>		
Facility or well name: <u>Mamalotes BAM I</u> API #: <u>30-025-35899</u> U/L or Qtr/Qtr <u>P</u> Sec <u>36</u> T <u>14S</u> R <u>34E</u>		
County: <u>Lea</u> Latitude <u>33.05589</u> Longitude <u>104.45934</u> NAD: 1927 <input checked="" type="checkbox"/> 1983 <input type="checkbox"/>		
Surface Owner: Federal <input type="checkbox"/> State <input type="checkbox"/> Private <input checked="" type="checkbox"/> Indian <input type="checkbox"/>		
Pit Type: Drilling <input type="checkbox"/> Production <input type="checkbox"/> Disposal <input type="checkbox"/> Work over <input checked="" type="checkbox"/> Emergency <input type="checkbox"/> Lined <input checked="" type="checkbox"/> Unlined <input type="checkbox"/> Liner type: Synthetic <input checked="" type="checkbox"/> Thickness <u>12</u> mil Clay <input type="checkbox"/> Pit Volume _____ bbl	Below-grade tank Volume: _____ bbl Type of fluid: _____ Construction material: _____ Double-walled, with leak detection? Yes <input type="checkbox"/> If not, explain why not. _____	
Depth to ground water (vertical distance from bottom of pit to seasonal high water elevation of ground water.)	Less than 50 feet 50 feet or more, but less than 100 feet 100 feet or more	(20 points) (10 points) XXXX (0 points)
Wellhead protection area: (Less than 200 feet from a private domestic water source, or less than 1000 feet from all other water sources.)	Yes No	(20 points) (0 points) XXXX
Distance to surface water: (horizontal distance to all wetlands, playas, irrigation canals, ditches, and perennial and ephemeral watercourses.)	Less than 200 feet 200 feet or more, but less than 1000 feet 1000 feet or more	(20 points) (10 points) XXXX (0 points) XXXX
Ranking Score (Total Points)		110 Points OCD

If this is a pit closure: (1) Attach a diagram of the facility showing the pit's relationship to other equipment and tanks. (2) Indicate disposal location: (check the onsite box if you are burying in place) on-site ☒ off-site ☐ If off-site, name of facility: _____. (3) Attach a general description of remedial action taken including remediation start date and end date. (4) Groundwater encountered: No ☐ Yes ☐ If yes, show depth below ground surface _____ ft. and attach sample results. (5) Attach soil sample results and a diagram of sample locations and excavations.

Additional Comments: Work plan for the Closure of Work-over Pit. A 20 mil liner will be placed 3' below grade with a minimum of 3' over-lap of the underlying pit.
Backfill encapsulated wastes with a minimum of 3' of clean soil or like material capable of supporting native plant growth.
A one-call and 48 hour notice will be provided to OCD prior to pit closure actions.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that the above-described pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines <input type="checkbox"/> , a general permit <input checked="" type="checkbox"/> , or an (attached) alternative OCD-approved plan <input type="checkbox"/> .		
Date: <u>01/23/2006</u>		
Printed Name/Title <u>Mike Stubblefield / Regulatory Agent</u>	Signature <u>me Stubblefield</u>	
Your certification and NMOCD approval of this application/closure does not relieve the operator of liability should the contents of the pit or tank contaminate ground water or otherwise endanger public health or the environment. Nor does it relieve the operator of its responsibility for compliance with any other federal, state, or local laws and/or regulations.		
Approval: Printed Name/Title <u>GARY W. WINK / STAFF MGR</u> Signature <u>Gary W. Wink</u> Date: <u>1/24/06</u>		

New Mexico Office of the State Engineer
POD Reports and Downloads

Mamabets-BAM1

Township: **14S** Range: **34E** Sections:

NAD27 X: Y: Zone: Search Radius:

County: Basin: Number: Suffix:

Owner Name: (First) (Last) ☐ Non-Domestic ☐ Domestic
☒ All

POD / Surface Data Report

Avg Depth to Water Report

Water Column Report

Clear Form

iWATERS Menu

Help

AVERAGE DEPTH OF WATER REPORT 01/23/2006

Bsn	Tws	Rng	Sec	Zone	X	Y	Wells	(Depth Water in Feet)		
								Min	Max	Avg
L	14S	34E	02				1	69	69	69
L	14S	34E	03				1	84	84	84
L	14S	34E	04				1	65	65	65
L	14S	34E	14				2	51	64	58
L	14S	34E	16				2	54	68	61
L	14S	34E	17				3	75	75	75
L	14S	34E	18				1	70	70	70
L	14S	34E	21				1	86	86	86
L	14S	34E	22				1	65	65	65
L	14S	34E	23				2	60	90	75
L	14S	34E	25				1	64	64	64
L	14S	34E	26				1	68	68	68
L	14S	34E	27				3	60	75	65
L	14S	34E	28				1	75	75	75
L	14S	34E	30				2	80	80	80
L	14S	34E	31				1	80	80	80
L	14S	34E	32				1	85	85	85
L	14S	34E	34				1	62	62	62
L	14S	34E	36				1	50	50	50

Record Count: 27

