

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

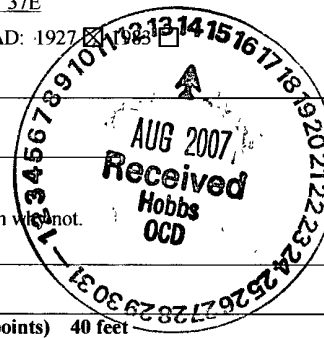
Form C- 144
June 1, 2004

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>Chevron MidContinent Alaska</u> Telephone: <u>(505) 394-1237</u> e-mail address: <u>BillyAnderson@chevron.com</u>		
Address: <u>Box 1949, Eunice, NM 88231</u>		
Facility or well name: <u>Rollon Brunson #7</u> #: <u>30-025-38335</u> U/L or Qtr/Qtr <u>G</u> Sec <u>10</u> T <u>22S</u> R <u>37E</u>		
County: <u>Lea</u> Latitude <u>N 32 deg 40967'</u> Longitude <u>W 103 deg 14676'</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 checked="" type="checkbox"/> Production <input type="checkbox"/> Disposal <input type="checkbox"/> Workover <input type="checkbox"/> Emergency <input type="checkbox"/> Lined <input checked="" type="checkbox"/> Unlined <input type="checkbox"/> Liner type: Synthetic <input checked="" type="checkbox"/> Thickness <u>20</u> mil Clay <input type="checkbox"/> Pit Volume <u>7000</u> 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 (20 points) 40 feet 50 feet or more, but less than 100 feet (10 points) 100 feet or more (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 (20 points) No (0 points)	
Distance to surface water: (horizontal distance to all wetlands, playas, irrigation canals, ditches, and perennial and ephemeral watercourses.)	Less than 200 feet (20 points) 200 feet or more, but less than 1000 feet (10 points) 1000 feet or more (0 points)	
Ranking Score (Total Points) 20		

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) onsite ☐ offsite ☒ If offsite, name of facility Sundance. (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: All fluids were removed from the pit. The pit liner and all impacted material was hauled to an NMOCD approved disposal facility.
Samples were collected below the liner and results are submitted with this final C144 form.
The excavation will be backfilled with clean soil, graded to surface and re-seeded.

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 ☒, a general permit ☐, or an (attached) alternative OCD-approved plan ☐.

Date: July 31, 2007

Printed Name/Title: Billy A. Anderson, HES Champion

Signature 

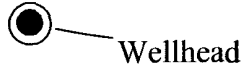
Your certification and NMOCD approval of this application/closure does not relieve the operator of liability should the contents of the pit or tank contaminate ground water or otherwise endanger public health or the environment. Nor does it relieve the operator of its responsibility for compliance with any other federal, state, or local laws and/or regulations.

Approval:

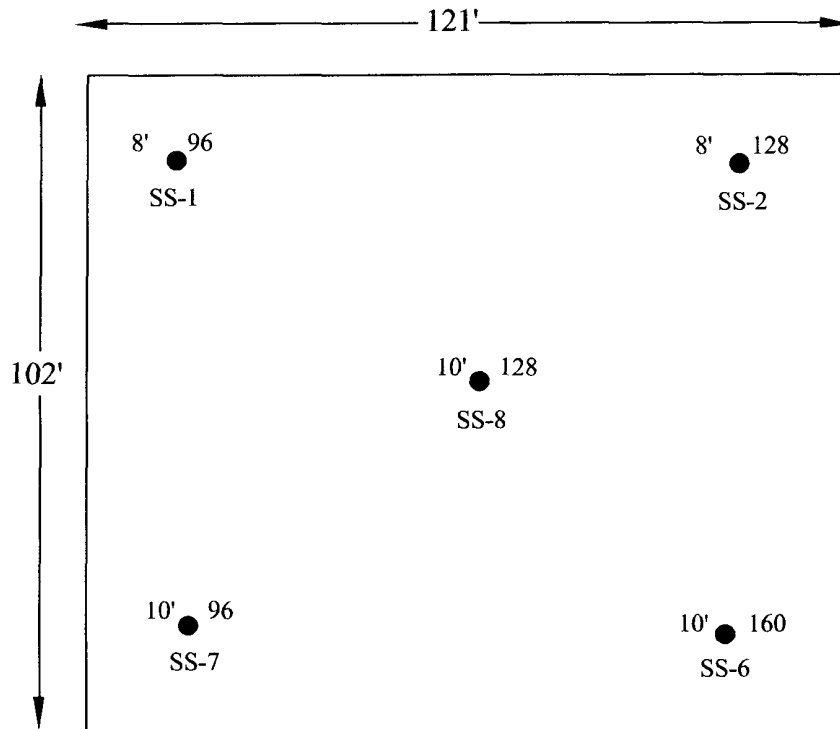
Printed Name/Title: L. JOHNSON - ENV. CO ENGR

Signature 

Date: 8.15.07



Wellhead



Approximate Excavation Boundary

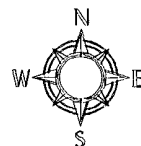
Soil Sample GPS Coordinates		
SS-1	N32°24.569'	W103°08.802'
SS-2	N32°24.569'	W103°08.784'
SS-6	N32°24.565'	W103°08.795'
SS-7	N32°24.559'	W103°08.802'
SS-8	N32°24.565'	W103°08.795'

LEGEND

8' 96

SS-1

Soil sample location taken at a depth (feet), with
chloride concentration (mg/kg).



DATE: 07-31-07
NAME: CHH
PROJECT NO.: 7-0902

FIGURE #1

LEA COUNTY, NEW MEXICO



Chevron U.S.A, Inc.

Rollon Brunson #7
U.L.G, Sec.10, T22S, R37E
API # 30-025-38335

Site Drawing with Sample Locations
(Not to Scale)

Ocotillo
ENVIRONMENTAL



PHONE (505) 393-2326 • 101 E. MARLAND • HOBBS, NM 88240

FAX TO: (432) 272-0304

Project Location: LEA COUNTY, NM

Analyzed By: HM

Note: Analyses performed on 1:4 w:v aqueous extracts.

Date _____

PLEASE NOTE **Liability and Damages** **Cardinal's** liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whatsoever shall be deemed waived unless made in writing and received by **Cardinal** within thirty (30) days after completion of the applicable service. In no event shall **Cardinal** be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of services hereunder by **Cardinal**, regardless of whether such claim is based upon any of the above-stated reasons or otherwise.



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Relinquished By:	Date:	Received By:	Phone Result:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Add'l Phone #:
	Time:		Fax Result:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Add'l Fax #:
Relinquished By:	Date:	Received By:	REMARKS:			
<i>Steve Cerna</i>	7-26-07	<i>Burgess J. Cook</i>	432-272-0904			
Delivered By: (Circle One)	Time:					
Sampler - UPS - Bus - Other:		Sample Condition	CHECKED BY:			
		Cool Intact	(Initials)			
		<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> Yes				
		<input type="checkbox"/> No <input type="checkbox"/> No				

† Cardinal cannot accept verbal changes. Please fax written changes to 505-393-2476



PHONE (915) 673-7001 • 2111 BEECHWOOD • ABILENE, TX 79603

PHONE (505) 393-2326 • 101 E. MARLAND • HOBBS, NM 88240

ANALYTICAL RESULTS FOR
OCOTILLO ENVIRONMENTAL
ATTN: CINDY CRAIN
P.O. BOX 1816
HOBBS, NM 88241
FAX TO: (432) 272-0304

Receiving Date: 07/25/07

Reporting Date: 07/25/07

Project Number: 7-0902

Project Name: ROLLON BRUNSON #7

Project Location: LEA COUNTY, NM

Analysis Date: 07/25/07

Sampling Date: 07/24/07

Sample Type: SOIL

Sample Condition: INTACT

Sample Received By: NF

Analyzed By: KS

LAB NO.	SAMPLE ID	Cl ⁻ (mg/Kg)
H12977-1	SS-8 @ 10'	128
	Quality Control	490
	True Value QC	500
	% Recovery	98
	Relative Percent Difference	< 0.1

METHOD: Standard Methods	4500-Cl ⁻ B
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Note: Analysis performed on a 1:4 w:v aqueous extract.


Chemist

07-25-07
Date

H12977 OCO

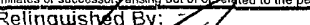
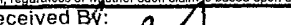

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(505) 393-2326 FAX (505) 393-2476 (325) 673-7001 FAX (325) 673-7020

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Relinquished By: 		Date: <u>7-25-07</u> Time: <u>9:00 AM</u>		Received By: 		Phone Result: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Add'l Phone #: _____ Fax Result: <input type="checkbox"/> Yes <input type="checkbox"/> No Add'l Fax #: _____ REMARKS: <u>432-272-0304</u>	
Relinquished By: _____		Date: _____ Time: _____		Received By: _____			
Delivered By: (Circle One) Sampler - UPS - Bus - Other: _____				Sample Condition Cool Intact <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No		CHECKED BY: (Initials) 	

† Cardinal cannot accept verbal changes. Please fax written changes to 505-393-2476