<u>District I</u> 1625 N French Dr , Hobbs, NM 88240 District III
District III
District III 1000 Rio Brazos Road, Aztec, NM 87410

1220 S St Francis Dr, Santa Fe, NM 87505

## State of New Mexico Energy Minerals and Natural Resources

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

Form C-144

June 1, 2004

Oil Conservation Division

Pit or Below-Grade Tank Registration or Closure

1220 South St. Francis Dr. Santa Fe, NM 87505

Type of action Registration of a pit or below-grade tank Closure of a pit or below-grade tank  Closure of a pit or below-grade tank		
Operator Range Operating New Mexico, Inc. Telephone 817  Address: 100 Throckmorton St., Ste. 1200, Fort Worth, TX 7  Facility or well name Eva Blinebry B #4 API #  County: Lea Latitude 32.265812°N	7-869-4145 e-mail address <u>lbrown</u> 6102 30-025-38604 U/L or Qtr/Qtr <u>C</u> Sec 34	@rangeresources com 4 T 23S R 37E
Surface Owner Federal   State ☐ Private ☐ Indian ☐		
Pit (Revised)  Type Drilling Production Disposal Workover Emergency Lined Unlined Liner type Synthetic Thickness mil Clay Pit Volume bbl	Below-grade tank  Volumebbl Type of fluid  Construction material  Double-walled, with leak detection? Yes If n	
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) ( 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)
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) ( 0 points)
	Ranking Score (Total Points)	12
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 your are burying in place) onsite  offsite  for if offsite, name of facility (3) Attach a general description of remedial action taken including remediation start date and end date (4) Groundwater encountered No Yes for if yes, show depth below ground surface fit and attach sample results (5) Attach soil sample results and a diagram of sample locations and excavations  Additional Comments REVISED C-144 RANGE OPERATING NEW MEXICO PROPOSES TO USE A CLOSED LOOP SYSTEM ON THIS WELL		
RECEIVED		
		MAR A 2009
I hereby certify that the information above is true and complete to the best of my knowledge and belief I further certify that the information above is true and complete to the best of my knowledge and belief I further certify that the best of my knowledge and belief I further certify that the best of my knowledge and belief I further certify that the best of my knowledge and belief I further certify that the information above is true and complete to the best of my knowledge and belief I further certify that the information above is true and complete to the best of my knowledge and belief I further certify that the information above is true and complete to the best of my knowledge and belief I further certify that the best of my knowledge and belief I further certify that the best of my knowledge and belief I further certify that the best of my knowledge and belief I further certify that the best of my knowledge and belief I further certify that the best of my knowledge and belief I further certified the best of my knowledge and belief I further certified the best of my knowledge and belief I further certified the best of my knowledge and belief I further certified the best of my knowledge and belief I further certified the best of my knowledge and belief I further certified the best of my knowledge and belief I further certified the best of my knowledge and belief I further certified the best of my knowledge and belief I further certified the best of my knowledge and belief I further certified the best of my knowledge and belief I further certified the best of my knowledge and belief I further certified the best of my knowledge and belief I further certified the best of my knowledge and belief I further certified the best of my knowledge and belief I further certified the best of my knowledge and belief I further certified the best of my knowledge and belief I further certified the best of my knowledge and belief I further certified the best of my knowledge and belief I further certified the best of my knowled		
Date02/29/08  Printed Name/Title _Linda L. Brown Signature		
Approval.  Printed Name/Title CARIS WILLIAMS / DIST. SURV. Signature Chus Williams Date 3/5/08		