1625 N French Dr., Hobbs, NM 88240 District II 1301 W Grand Avenue, Artesia, NM 8821

District III

District IV

State of New Mexico Minerals and Natural Resources Department

Oil Conservation Division

1000 Rio Brazos Road, Aztec, NM 87410 1220 S St Francis Dr , Santa Fe, NM 87505

.IIII 0 7 2003<sup>20</sup> South St. Francis Dr. Santa Fe, NM 87505

For temporary pits, closed-loop systems, and **below-grade tanks**, submit to the appropriate NMOCD District Office. For permanent pits and exceptions submit to the Santa Fe Environmental Bureau office and provide a copy to the appropriate NMOCD District Office.

## Pit, Closed-Loop System, Below-Grade Tank, or Proposed Alternative Method Permit or Closure Plan Application

Type of action: Permit of a pit, closed-loop system, below-grade tank, or proposed alternative method Closure of a pit, closed-loop system, below-grade tank, or proposed alternative method

Instructions: Please submit one application (Form C-144) per individual pit, closed-loop system, below-grade tank or alternative request

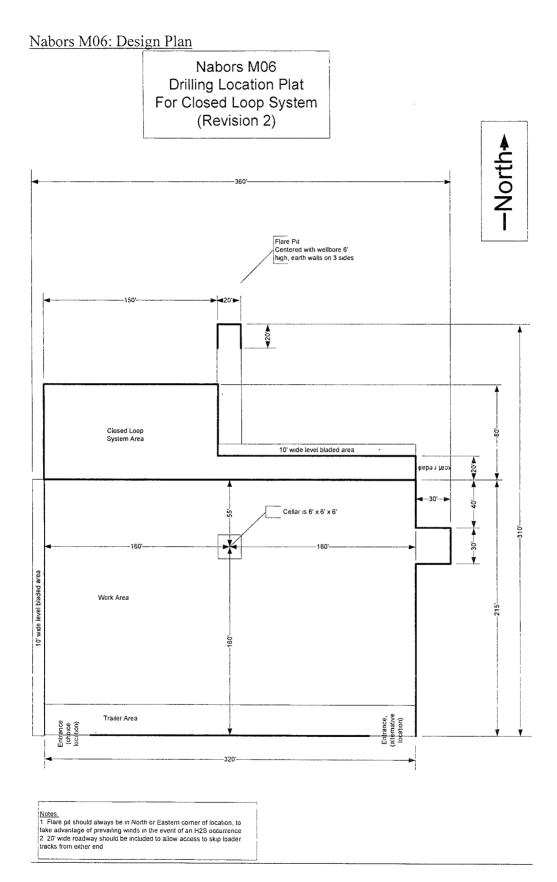
Please be advised that approval of this request does not relieve theoperator of liability should operations result in pollution of surface water, ground water or the

| environment. Two does approval reneve the operator of as responsibility to com   | pry with any other applicable governmental authority's rules, regulations of ordinances.   |
|--|--|
| Operator: CHEVRON U.S.A. INC. OGRID #: 4323  |  |
| Address: 15 SMITH ROAD, MIDLAND, TEXAS 79705   |  |
| Facility or well name: C.H. WEIR A #22   | ~  |
| API Number: 30-025-38965 — OCD Permit Number. 7 <del>6671</del>  | PI-00095   |
| U/L or Qtr/Qtr J Section 12 Township 20-S Range  | 37-E County: LEA, NEW MEXICO   |
| Center of Proposed Design: Latitude  | Longitude NAD: ☐1927 ☐ 1983  |
| Surface Owner:   Federal   State   Private   Tribal Trust or Indian  | Allotment  |
| Pit: Subsection F or G of 19.15.17.11 NMAC   | ☐ Closed-loop System: Subsection H of 19.15.17.11 NMAC   |
| Temporary: Drilling Workover   | ☐ Drying Pad ☐ Tanks ☐ Haul-off Bins ☒ Other Haul off in dump truck  |
| ☐ Permanent ☐ Emergency ☐ Cavitation ☐ Steel Pit   | ☐ Lined ☐ Unlined  |
| Lined Unlined  | Liner type: Thicknessmil   |
| Liner type: Thicknessmil   | Other  |
| Other String-Reinforced  | Seams: Welded  Factory  Other  |
| Seams: Welded Factory Other  | Volume: 250 bbl 52 yd <sup>3</sup>   |
| Volume:bbl Dimensions: L x W x D   | Dimensions: Length 32' x Width 10.5'   |
| Below-grade tank: Subsection I of 19.15.17.11 NMAC   | Fencing: Subsection D of 19.15.17.11 NMAC  |
| Volume:bbl   | ☐ Chain link, six feet in height, two strands of barbed wire at top  |
| Type of fluid:   | Four foot height, four strands of barbed wire evenly spaced between one and  |
| Tank Construction material:  | four feet  |
| Secondary containment with leak detection  | Netting: Subsection E of 19.15.17.11 NMAC  |
| ☐ Visible sidewalls, liner, 6-inch lift and automatic overflow shut-off  | Screen Netting Other   |
| ☐ Visible sidewalls and liner  | ☐ Monthly inspections  |
| ☐ Visible sidewalls only   | Signs: Subsection C of 19.15.17.11 NMAC  |
| Other  | ☐ 12'x24', 2' lettering, providing Operator's name, site location, and   |
| Liner type: Thicknessmil  HDPE PVC   | emergency telephone numbers  |
| Other  | ☐ Signed in compliance with 19.15.3.103 NMAC   |
| Alternative Method: Submittal of an exception request is required. Exceptions must be submitted to the Santa Fe Environmental Bureau office for consideration of approval. | Administrative Approvals and Exceptions:  Justifications and/or demonstrations of equivalency are required. Please refer to 19.15 17 NMAC for guidance.  Please check a box if one or more of the following is requested, if not leave blank:  Administrative approval(s): Requests must be submitted to the appropriate division district or the Santa Fe Environmental Bureau office for consideration of approval.  Exception(s): Requests must be submitted to the Santa Fe Environmental Bureau office for consideration of approval. |

| Siting Criteria (regarding permitting): 19.15.17.10 NMAC Instructions: The applicant must demonstrate compliance for each siting criteria below in the application. Recommendations of acceptable source material are provided below. Requests regarding changes to certain siting criteria may require administrative approval from the appropriate district office or may be considered an exception which must be submitted to the Santa Fe Environmental Bureau office for consideration of approval. Applicant must attach justification for request. Please refer to 19.15.17.10 NMAC for guidance. Siting criteria does not apply to drying pads or above-grade tanks associated with a closed-loop system.   |                        |
|--|------------------------|
| Ground water is less than 50 feet below the bottom of the temporary pit, permanent pit, or below-grade tank.  - NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells   | ☐ Yes ☐ No             |
| Within 300 feet of a continuously flowing watercourse, or 200 feet of any other significant watercourse or lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark).  - Topographic map; Visual inspection (certification) of the proposed site   | ☐ Yes ☐ No             |
| Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application. (Applies to temporary, emergency, or cavitation pits and below-grade tanks)  - Visual inspection (certification) of the proposed site, Aerial photo; Satellite image   | ☐ Yes ☐ No<br>☐ NA     |
| Within 1000 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application.  (Applies to permanent pits)  - Visual inspection (certification) of the proposed site; Aerial photo; Satellite image   | ☐ Yes ☐ No<br>☐ NA     |
| Within 500 horizontal feet of a private, domestic fresh water well or spring that less than five households use for domestic or stock watering purposes, or within 1000 horizontal feet of any other fresh water well or spring, in existence at the time of initial application.  - NM Office of the State Engineer - iWATERS database search; Visual inspection (certification) of the proposed site   | ☐ Yes ☐ No             |
| Within incorporated municipal boundaries or within a defined municipal fresh water well field covered under a municipal ordinance adopted pursuant to NMSA 1978, Section 3-27-3, as amended.  - Written confirmation or verification from the municipality; Written approval obtained from the municipality  | ☐ Yes ☐ No             |
| Within 500 feet of a wetland.  - US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site  | ☐ Yes ☐ No             |
| Within the area overlying a subsurface mine.  - Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division  | ☐ Yes ☐ No             |
| <ul> <li>Within an unstable area.</li> <li>Engineering measures incorporated into the design; NM Bureau of Geology &amp; Mineral Resources; USGS; NM Geological Society; Topographic map</li> </ul>  | ☐ Yes ☐ No             |
| Within a 100-year floodplain FEMA map  | ☐ Yes ☐ No             |
| Temporary Pits, Emergency Pits, and Below-grade Tanks Permit Application Attachment Checklist: Subsection B of 19.15.17.91  Instructions: Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the deattached.    Hydrogeologic Report (Below-grade Tanks) - based upon the requirements of Paragraph (4) of Subsection B of 19.15.17.9 NMAC   Hydrogeologic Data (Temporary and Emergency Pits) - based upon the requirements of Paragraph (2) of Subsection B of 19.15.17.   Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC   Design Plan - based upon the appropriate requirements of 19.15.17.11 NMAC   Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC   Closure Plan - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC | ocuments are<br>9 NMAC |
| Closed-loop Systems Permit Application Attachment Checklist: Subsection B of 19.15.17.9 NMAC   |                        |
| Instructions: Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the do attached.  Geologic and Hydrogeologic Data (required for on-site closure) - based upon the requirements of Paragraph (3) of Subsection B of Siting Criteria Compliance Demonstrations (required for on-site closure) - based upon the appropriate requirements of 19.15.17 10 Design Plan - based upon the appropriate requirements of 19.15.17.11 NMAC Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC Closure Plan - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC  | 19.15.17.9             |
| ☐ Previously Approved Design (attach copy of design) API Number:   |                        |

| Permanent Pits Permit Application Checklist: Subsection B of 19.15.17.9 NMAC  Instructions: Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the de-   | ocuments are                              |
|--|---|
| attached.  ☐ Hydrogeologic Report - based upon the requirements of Paragraph (1) of Subsection B of 19.15.17.9 NMAC ☐ Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC ☐ Climatological Factors Assessment ☐ Certified Engineering Design Plans - based upon the appropriate requirements of 19.15.17.11 NMAC ☐ Dike Protection and Structural Integrity Design - based upon the appropriate requirements of 19.15.17.11 NMAC ☐ Leak Detection Design - based upon the appropriate requirements of 19.15.17.11 NMAC ☐ Liner Specifications and Compatibility Assessment - based upon the appropriate requirements of 19.15.17.11 NMAC ☐ Quality Control/Quality Assurance Construction and Installation Plan ☐ Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC ☐ Freeboard and Overtopping Prevention Plan - based upon the appropriate requirements of 19.15.17.11 NMAC ☐ Nuisance or Hazardous Odors, including H₂S, Prevention Plan ☐ Emergency Response Plan ☐ Oil Field Waste Stream Characterization ☐ Monitoring and Inspection Plan ☐ Erosion Control Plan ☐ Erosion Control Plan ☐ Closure Plan - based upon the appropriate requirements of Subsection C of 19.15 17.9 NMAC and 19 15.17.13 NMAC |   |
| Proposed Closure: 19.15.17.13 NMAC   | 7   |
| Type: Drilling Workover Emergency Cavitation Permanent Pit Below-grade Tank Closed-loop System Proposed Closure Method: Waste Excavation and Removal   | _ Alternative                             |
| ☐ Waste Removal (Closed-loop systems only)   |   |
| ☐ On-site Closure Method (Only for temporary pits and closed-loop systems) ☐ In-place Burial ☐ On-site Trench Burial   |   |
| Alternative Closure Method (Exceptions must be submitted to the Santa Fe Environmental Bureau for con  | nsideration)                              |
| Siting Criteria (regarding on-site closure methods only): 19.15.17.10 NMAC Instructions: Each siting criteria requires a demonstration of compliance in the closure plan. Recommendations of acceptable source material are provided below. Requests regarding changes to certain siting criteria may require administrative approval from the appropriate district office or may be considered an exception which must be submitted to the Santa Fe Environmental Bureau office for consideration of approval. Justifications and/or demonstrations of equivalency are required. Please refer to 19.15.17.10 NMAC for guidance.   |   |
| Ground water is less than 50 feet below the bottom of the buried waste.  - NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells  | <ul><li>☐ Yes ☐ No</li><li>☐ NA</li></ul> |
| Ground water is between 50 and 100 feet below the bottom of the buried waste  - NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells   | ☐ Yes ☐ No<br>☐ NA                        |
| Ground water is more than 100 feet below the bottom of the buried waste.  - NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells   | ☐ Yes ☐ No<br>☐ NA                        |
| Within 300 feet of a continuously flowing watercourse, or 200 feet of any other significant watercourse or lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark).  - Topographic map; Visual inspection (certification) of the proposed site   | ☐ Yes ☐ No                                |
| Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application.  - Visual inspection (certification) of the proposed site; Aerial photo; Satellite image   | ☐ Yes ☐ No                                |
| Within 500 horizontal feet of a private, domestic fresh water well or spring that less than five households use for domestic or stock watering purposes, or within 1000 horizontal feet of any other fresh water well or spring, in existence at the time of initial application.  - NM Office of the State Engineer - iWATERS database; Visual inspection (certification) of the proposed site  | Yes No                                    |
| Within incorporated municipal boundaries or within a defined municipal fresh water well field covered under a municipal ordinance adopted pursuant to NMSA 1978, Section 3-27-3, as amended.  - Written confirmation or verification from the municipality; Written approval obtained from the municipality  | Yes No                                    |
| Within 500 feet of a wetland.  - US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site  | ☐ Yes ☐ No                                |
| Within the area overlying a subsurface mine.  - Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division  | ☐ Yes ☐ No                                |
| <ul> <li>Within an unstable area.</li> <li>Engineering measures incorporated into the design; NM Bureau of Geology &amp; Mineral Resources; USGS; NM Geological Society; Topographic map</li> </ul>  | ☐ Yes ☐ No                                |
| Within a 100-year floodplain FEMA map  | ☐ Yes ☐ No                                |

| Waste Excavation and Removal Closure Plan Checklist: (19.15.17.13 NMAC) Instructions: Each of the following items must be attached to the  |
|--|
| closure plan. Please indicate, by a check mark in the box, that the documents are attached.  |
| ☐ Protocols and Procedures - based upon the appropriate requirements of 19.15.17.13 NMAC ☐ Confirmation Sampling Plan (if applicable) - based upon the appropriate requirements of Subsection F of 19.15.17.13 NMAC  |
| Disposal Facility Name and Permit Number (for liquids, drilling fluids and drill cuttings)   |
| Soil Backfill and Cover Design Specifications - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC  |
| Re-vegetation Plan - based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC   |
| Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC  |
| Waste Removal Closure For Closed-loop Systems That Utilize Haul-off Bins Only: (19.15.17.13.D NMAC) Instructions: Please indentify the facility  |
| or facilities for the disposal of liquids, drilling fluids and drill cuttings.   |
| Disposal Facility Name: SUNDANCE Disposal Facility Permit Number: NM-01-0003   |
| On-Site Closure Plan Checklist: (19.15.17.13 NMAC) Instructions: Each of the following items must be attached to the closure plan. Please indicate,  |
| by a check mark in the box, that the documents are attached.   |
| Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC  |
| Proof of Surface Owner Notice - based upon the appropriate requirements of Subsection F of 19.15.17.13 NMAC  |
| Construction and Design of Burial Trench (if applicable) based upon the appropriate requirements of 19.15.17.11 NMAC   |
| ☐ Protocols and Procedures - based upon the appropriate requirements of 19.15.17 13 NMAC   |
| Confirmation Sampling Plan (if applicable) - based upon the appropriate requirements of Subsection F of 19.15.17.13 NMAC   |
| Waste Material Sampling Plan - based upon the appropriate requirements of Subsection F of 19.15.17.13 NMAC   |
| Disposal Facility Name and Permit Number (for liquids, drilling fluids and drill cuttings or in case on-site closure standards cannot be achieved)   |
| ☐ Soil Cover Design - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC ☐ Re-vegetation Plan - based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC   |
| Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC  |
|  |
| Operator Application Certification:  |
| I hereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief.   |
| Name (Print): Boyd Schaneman Title: Drilling Superintendent  |
| X Q . d . L . \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \  |
| Signature: Date: 07-02-2008  |
| e-mail address: <u>BSchaneman@chevron.com</u> Telephone: 432-687-7402  |
| Final address. Dechanchanalaynevion.com releptione. 452-00/-/402   |
|  |
| OCD Approval: Permit Application (including closure plan) Closure Plan (only)  |
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| OCD Approval: Permit Application (including closure plan) Closure Plan (only)  |
| OCD Approval: Permit Application (including closure plan) Closure Plan (only)  OCD Representative Signature: Approval Date: 7/1/08  OCD Permit Number: Plan (only)   |
| OCD Approval: Permit Application (including closure plan) Closure Plan (only)  OCD Representative Signature: Approval Date: 7/168  Title: OCD Permit Number: Plan (only)  Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC   |
| OCD Approval: Permit Application (including closure plan) Closure Plan (only) OCD Representative Signature: Approval Date: 7/108  Title: OCD Permit Number: 1 - DED 95  Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC  Closure Completion Date:   |
| OCD Approval: Permit Application (including closure plan) Closure Plan (only)  OCD Representative Signature: Approval Date: 7/1/88  Title: OCD Permit Number: Plan (only)  Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC  Closure Method:   |
| OCD Approval: Permit Application (including closure plan) Closure Plan (only)  OCD Representative Signature: Approval Date: 7/168  Title: OCD Permit Number: Plan (only)  Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC  Closure Method: Alternative Closure Method  Approval Date: 7/168  Approval Date: 7/1 |
| OCD Approval: Permit Application (including closure plan) Closure Plan (only)  OCD Representative Signature: Approval Date: 7/168  Title: OCD Permit Number: Plan (only)  Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC  Closure Method: Closure Completion Date: Alternative Closure Method  If different from approved plan, please explain.  |
| OCD Approval: Permit Application (including closure plan) Closure Plan (only)  OCD Representative Signature: Approval Date: 7/108  OCD Permit Number: 1-00095  Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC  Closure Method: Closure Completion Date: Alternative Closure Method  If different from approved plan, please explain.  Closure Report Attachment Checklist: Instructions: Each of the following items must be attached to the closure report. Please indicate, by a check   |
| OCD Approval: Permit Application (including closure plan) Closure Plan (only)  OCD Representative Signature: Approval Date: 7/1/08  Title: OCD Permit Number: Plan (only)  OCD Permit Number: Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC  Closure Method: Alternative Closure Method Alternative Closure Method  If different from approved plan, please explain.  Closure Report Attachment Checklist: Instructions: Each of the following items must be attached to the closure report. Please indicate, by a checkmark in the box, that the documents are attached.   |
| OCD Representative Signature:    Approval Date:  |
| OCD Representative Signature:    Approval Date:   DED 95   |
| OCD Representative Signature:    Approval Date:     Approval Date:     Approval Date:       Approval Date:     Approval Date:     Approval Date:     Approval Date:     Approval Date:     Approval Date:     Approval Date:     Approval Date:     Approval Date:     Approval Date:     Approval Date:     Approval Date:     Approval Date:     Approval Date:     Approval Date:     Approval Date:     Approval Date:     Approval Date:     Approval Date: |
| OCD Representative Signature:  OCD Permit Number:  OCD Permit Numb |
| OCD Approval:  Permit Application (including closure plan)  Closure Plan (only)  OCD Representative Signature:   |
| OCD Approval: Permit Application (including closure plan) Closure Plan (only) OCD Representative Signature:  OCD Permit Number: Pl - DD 95  Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC Closure Method: Waste Excavation and Removal On-Site Closure Method Alternative Closure Method If different from approved plan, please explain.  Closure Report Attachment Checklist: Instructions: Each of the following items must be attached to the closure report. Please indicate, by a check mark in the box, that the documents are attached. Proof of Closure Notice Proof of Deed Notice (if applicable) Plot Plan Confirmation Sampling Analytical Results Waste Material Sampling Analytical Results Waste Material Sampling Analytical Results Soil Backfilling and Cover Installation   |
| OCD Approval:   Permit Application (including closure plan)   Closure Plan (only)  OCD Representative Signature:   Approval Date:  |
| OCD Approval:   Permit Application (including closure plan)   Closure Plan (only)  OCD Representative Signature:   Approval Date:   Z///S    OCD Permit Number:   DDO 95    Closure Report (required within 60 days of closure completion):   Subsection K of 19.15.17.13 NMAC   Closure Completion Date:   Closure Method:   Alternative Closure Method   Alternative Closure Method   If different from approved plan, please explain.   Closure Report Attachment Checklist: Instructions: Each of the following items must be attached to the closure report. Please indicate, by a check mark in the box, that the documents are attached.   Proof of Closure Notice   Proof of Deed Notice (if applicable)   Plot Plan   Confirmation Sampling Analytical Results   Waste Material Sampling Analytical Results   Disposal Facility Name and Permit Number   Soil Backfilling and Cover Installation   Re-vegetation Application Rates and Seeding Technique   Site Reclamation (Photo Documentation)   |
| OCD Approval:  |
| OCD Approval:   Permit Application (including closure plan)   Closure Plan (only)  OCD Representative Signature:   Approval Date:     Approval Date:     Approval Date:     OCD Permit Number:   DD 0 95    Closure Report (required within 60 days of closure completion):   Subsection K of 19.15.17.13 NMAC   Closure Completion Date:   Closure Method:   Alternative Closure Method   Alternative Closure Method   If different from approved plan, please explain.   Closure Report Attachment Checklist: Instructions: Each of the following items must be attached to the closure report. Please indicate, by a check mark in the box, that the documents are attached.   Proof of Closure Notice   Proof of Deed Notice (if applicable)   Plot Plan   Confirmation Sampling Analytical Results   Disposal Facility Name and Permit Number   Soil Backfilling and Cover Installation   Rev-vegetation Application Rates and Seeding Technique   Site Reclamation (Photo Documentation)   On-site Closure Location: Latitude   Longitude   NAD:   1927   1983   Operator Closure Certification:   |
| DCD Approval:   Permit Application (including closure plan)   Closure Plan (only)  |
| OCD Approval:  |
| DCD Approval:   Permit Application (including closure plan)   Closure Plan (only)  |
| DCD Approval:   Permit Application (including closure plan)   Closure Plan (only)  |
| OCD Approval:  |
| DCD Approval:   Permit Application (including closure plan)   Closure Plan (only)  |



Nabors M06: Operating and Maintenance Plan

- 1. 250 bbl, ½ frac. tank, cutting tank with dimensions of 32' x 10.5' x 6'tall will be installed on top of 20 mil plastic barrier.
- 2. Cuttings will be discharged from shaker into cuttings tank.
- 3. Cutting tank will be continuously monitored by designated roughneck or derrickman so that cuttings tank will not be overfilled.
- 4. Rig crew will visually inspect fluid integrity of cuttings tank on a daily basis.
- 5. Documentation of visual inspection of cutting tank will be captured on IADC Drilling Report.

## Nabors M06: Closure Plan

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- 1. Drilled cuttings will be dipped out of tank with backhoe bucket and placed in suitable transport container (dump truck tank or cuttings bin).
- 2. Drill cuttings will be disposed of at a suitable off-location waste disposal facility.