1000 Rio Brazos Road, Aztec, NM 87410

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

District III

State of New Mexico gy Minerals and Natural Resources

Form C-144 CLEZ

July 21, 2008

Department Oil Conservation Division

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

For closed-loop systems that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure, submit to the appropriate NMOCD District Office.

stem Permit or Closure Plan Application

sphaul-off bins and propose to implement waste removal for closure)

Type of action: X Permit Closure

Instructions: Please submit one application (Form C-144 CLEZ) per individual closed-loop system request. For any application request other than for a closed-loop system that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure, please submit a Form C-144.

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

environment. Nor does approval relieve the operator of its responsibility to comply with any other applicable governmental authority's rules, regulations or ordinances.					
Operator: VANGUARD PERMIAN, LLC. OGRID #: 258350					
Address: 1209 SOUTH MAIN LOVINGTON NEW MEXICO 88260					
Facility or well name: STATE SECTION 1LA # 21					
API Number: 30-025-39106 OCD Permit Number: P1-00374					
U/L or Qtr/Qtr Lot # 2 Section 1 Township 17S Range 36E County: LEA CO.					
Center of Proposed Design: Latitude 32.869919° N Longitude 103.304149 W NAD: X1927 1983					
Surface Owner: Federal X State Tribal Trust or Indian Allotment					
Z. Closed-loop System: Subsection H of 19.15.17.11 NMAC Operation: Drilling a new well Workover or Drilling (Applies to activities which require prior approval of a permit or notice of intent) P&A Above Ground Steel Tanks or Haul-off Bins					
Signs: Subsection C of 19.15.17.11 NMAC 12"x 24", 2" lettering, providing Operator's name, site location, and emergency telephone numbers Signed in compliance with 19.15.3.103 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 documents are attached. 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 (Please complete Box 5) - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC Previously Approved Design (attach copy of design) API Number: Previously Approved Operating and Maintenance Plan API Number:					
S. Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or 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. Use attachment if more than two facilities are required. Disposal Facility Name: GANDY MARLEY Disposal Facility Permit Number: NM-711=1=0020 Disposal Facility Name: CONTROLLED RECOVERY, INC. Disposal Facility Permit Number: NM-01-0006					
Disposal Facility Name: CONTROLLED RECOVERY, INC. Disposal Facility Permit Number: NM-01-0006 Will any of the proposed closed-loop system operations and associated activities occur on or in areas that will not be used for future service and operations? Yes (If yes, please provide the information below) No					
Required for impacted areas which will not be used for future service and operations: 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					
6. 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): NEWT PAINTER Title: PRODUCTION FORMAN					
Signature: North t Date: 8-22-08					
e-mail address: NPAINTER @ VNRLLC . Com Telephone: 432-438-3972					

OCD Approval: Permit Application (including closure plan) Closure Plan (only)							
OCD Representative Signature:	Approval Date: 9/29/08						
Title:Geologist	OCD Permit Number: P1-00374						
Closure Report (required within 60 days of closure completion): 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.							
Closure Completion Date:							
9. Closure Report Regarding Waste Removal Closure For Closed-loop Systems Instructions: Please indentify the facility or facilities for where the liquids, drive facilities were utilized.	s That Utilize Above Ground Steel Tanks or Haul-off Bins Only: lling fluids and drill cuttings were disposed. Use attachment if more than						
Disposal Facility Name:	Disposal Facility Permit Number:						
Disposal Facility Name:	——						
Were the closed-loop system operations and associated activities performed on or Yes (If yes, please demonstrate compliance to the items below) \(\subseteq \text{No} \)	in areas that will not be used for future service and operations?						
Required for impacted areas which will not be used for future service and operate Site Reclamation (Photo Documentation) Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique	ions:						
Operator Closure Certification: I hereby certify that the information and attachments submitted with this closure requirements. I also certify that the closure complies with all applicable closure requirements.	eport is true, accurate and complete to the best of my knowledge and sents and conditions specified in the approved closure plan.						
Name (Print):	Title:						
Signature:	Date:						
e-mail address:	Telephone:						

VANGUARD PERMIAN, LLC. STATE SECTION 1-LA # 21 LOT # 2 SECTION 1 T17S-R36E LEA CO. NM

Closed Loop System

Design Plan

Equipment list,

- 2-414 Swaco Centrifuges
- 2-4 screen Mongoose shale shakers
- 2-250 BBL tanks to hold fluid
- 2- CRI Bins with track system
- 2- 500 BBL frac tanks for fresh water
- 2-500 BBL frac tanks for brine water

Operation and Maintenance

Closed Loop equipment will be inspected daily by each tour and any necessary maintenance performed

Any leak in system will be repaired and/or contained immediately

OCD notified within 48 hours

Remediation process started

Closure Plan

During drilling	operation	s all liquids,	drilling fi	uids and o	cuttings		
Will be haule	ed off via:	CRI(G ontrol	Hed Rec	covery inc	corporated F	Permit R-	
9166). GANA	y CORP	TO GANA	sy Mi	arloy	PERMIT #	Permit R- WM - 7+1-7 O1 - 00	- 002 0
	, ,		/	/ .		01-00	719
11		CRÍ	I M	0 / 4	. ``		
14 %	<i>/</i> .	UKI	10 11	U 1 -00	ひろ		