State of New Mexico <u>District I</u> 1625 N. French Dr , Hobb 1301 W. Grand Avenue, Artesia, NSF48210 A 2009 **Energy Minerals and Natural Resources** 

1000 Rio Brazos Road, Aztec

1220 S. St. Francis Dr

District IV

Department

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

Form C-144 CLEZ July 21, 2008

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.

## Closed-Loop System Permit or Closure Plan Application

(that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure)

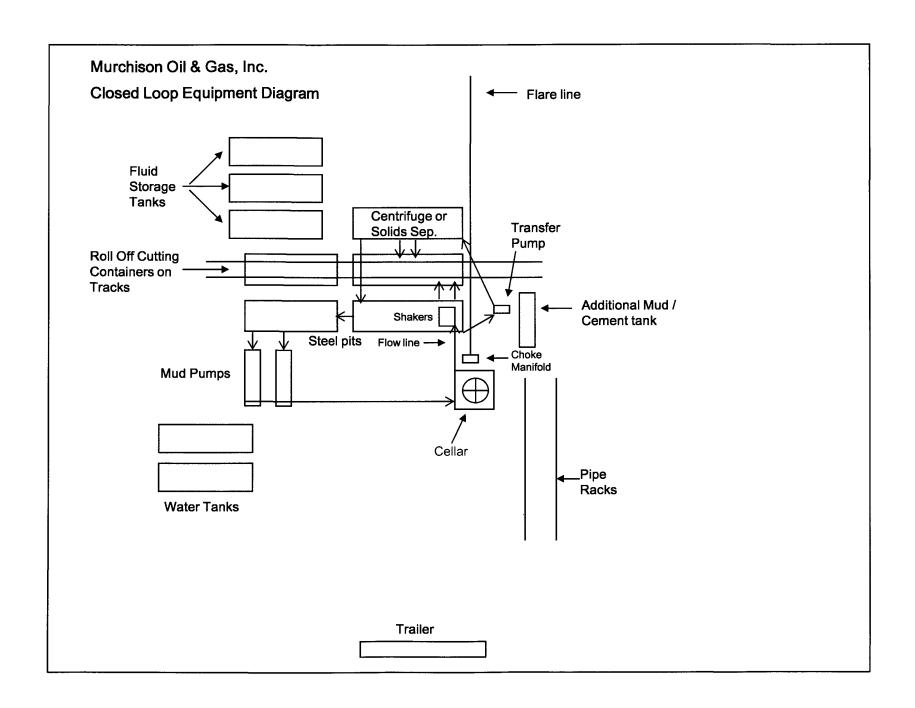
Type of action: Permit Closure

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.  |  |  |
|---|--|--|
| 1. OCDID#. 15262  |  |  |
| Operator: Murchison Oil & Gas, Inc.  OGRID #:15363  |  |  |
| Address: 1100 Mira Vista Boulevard, Plano, Texas 75093-4698   |  |  |
| Facility or well name: HIGHTOWER STATE UNIT #3  |  |  |
| API Number: 30-015- 025- 391300CD Permit Number: P1-00415   |  |  |
| U/L or Qtr/Qtr I Section 27 Township 12S Range 33E County: Lea —  |  |  |
| Center of Proposed Design: Latitude 33° 14'50.12" Longitude 103° 35'39.61" NAD: ☐ 1927 ☐ 1983   |  |  |
| Surface Owner: ☐ Federal ☑ State ☐ Private ☐ Tribal Trust or Indian Allotment —   |  |  |
| 2.   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)  |  |  |
| ☐ Above Ground Steel Tanks or ☐ Haul-off Bins   |  |  |
| 3.  |  |  |
| 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: CRI Disposal Facility Permit Number: PATO NOOO 6  |  |  |
| Disposal Facility Name: GMI Disposal Facility Permit Number: 711-019-001 WM. DI. DDIQ   |  |  |
| Will any of the proposed closed-loop system operations and associated activities occur on or in areas that <i>will not</i> 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): LEE AND ROLLINS Title: AGENT FOR MUR  | CHISON OIL & GAS, INC.           |  |
| Signature: Pur  | Date:                            |  |
| e-mail address: keann@gss04.com Telephone: (432) 685-9158   |                                  |  |
| 7. OCD Approval: Permit Application (including closure plan)  Closure Plan (only)   |                                  |  |
| OCD Representative Signature:   | Approval Date: 9/8/08            |  |
| 7. OCD Approval: Permit Application (including closure plan) Closure Pla OCD Representative Signature: Title: Geologist   | OCD Permit Number: PL-00415      |  |
| 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 That Utilize Above Ground Steel Tanks or Haul-off Bins Only: Instructions: Please indentify the facility or facilities for where the liquids, drilling fluids and drill cuttings were disposed. Use attachment if more than two facilities were utilized.  |                                  |  |
| Disposal Facility Name:   | Disposal Facility Permit Number: |  |
| Disposal Facility Name:   | Disposal Facility Permit Number: |  |
| Were the closed-loop system operations and associated activities performed on or in areas that <i>will not</i> be used for future service and operations?  Yes (If yes, please demonstrate compliance to the items below) \( \subseteq \text{No} \)   |                                  |  |
| Required for impacted areas which will not be used for future service and operation     Site Reclamation (Photo Documentation)   Soil Backfilling and Cover Installation   Re-vegetation Application Rates and Seeding Technique  | ons:                             |  |
| 10. Operator Closure Certification:   |                                  |  |
| I hereby certify that the information and attachments submitted with this closure report is true, accurate and complete to the best of my knowledge and belief. I also certify that the closure complies with all applicable closure requirements and conditions specified in the approved closure plan.  |                                  |  |
| Name (Print):   | Title:                           |  |
| Signature:  | Date:                            |  |
| e-mail address:   | Telephone:                       |  |



## **CLOSED-LOOP OPERATING AND MAINTENANCE PLAN**

- All drilling fluid circulated over shaker(s) with cuttings discharged into roll-off container.
- Fluid and fines below shaker(s) are circulated with transfer pump through centrifuge(s) or solids separator with cuttings and fines discharged into roll-off container.
- Fluid is continuously re-circulated through equipment with polymer added to aid separation of cutting fines.
- Roll-off containers are lined and de-watered with fluids re-circulated into system.
- Additional tank is used to capture unused drilling fluid or cement returns from casing jobs.
- This equipment will be maintained 24 hours/day by solids control personnel and/or rig crews that stay on location.
- Cuttings will be hauled to one of the following depending upon which rig is available to drill this well:
  - o CRI Permit Number R9166
  - o GMI Permit Number 711-019-001

Murchison Oil & Gas, Inc. Hightower State Unit #3 1750' FSL & 330' FEL, UNIT I Sec 27, T12S, R33E Lea County, New Mexico



3106 N. Big Spring St., Ste. 100 Midland, TX 79705 Tel: (432) 685-9158

September 3, 2008

Oil Conservation Division District I 1625 N. French Drive Hobbs, NM 88240

Attn: Donna Mull

Re: Hightower State Unit #3 Section 27, T12S, R33E,

Lea Co., NM

Dear Donna,

Please find enclosed Form C-144 CLEZ, Closed-Loop System Permit to reflect the following well to have a Closed Loop System. Also enclosed you will find Closed-Loop Equipment Diagram as well as a Closed-Loop Operating and Maintenance Plan.

Gray Surface Specialties is representing Murchison Oil & Gas, Inc. on the above referenced application if you have any questions please feel free to contact me at 432.685.9158.

AECENED

SEP - 4 2008 HOBBS OCD

Sincerely yours,

Lee Ann Rollins

Gray Surface Specialties

Agent for Murchison Oil & Gas, Inc.

**Enclosures**