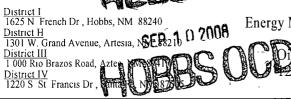
State of New Mexico Energy Minerals and Natural Resources Department

Form C-144 CLEZ . July 21, 2008



Conservation Division 20 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./or closure, submit to the appropriate NMOCD District Office

Closed-Loop System Permit or Closure Plan Application		
(that only 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.		
Operator. Mack Energy Corporation	OGRID# 013837	
Address. P.O. Box 960 Artesia, NM 88210-0960	Oddib#	
Facility or well name Dogz SWD #1		
API Number 30-025-38963	ermit Number P1-80438	
API Number 30-025-38963 OCD P U/L or Qtr/Qtr I Section 17 Township 18S	Range 37E County Lea	
Center of Proposed Design: Latitude Longi	tude NAD 1927 1983	
Surface Owner: Federal State Private Tribal Trust or Indian Allotme	nt	
Trust of Indian Anotheric		
Closed-loop System: Subsection H of 19.15.17.11 NAIAC		
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	the second of th	
Sign: Subsection C of 19.15.17.11 NMAC		
12" x 24", 2" lettering, providing Operator's name, site location, and emergence	y 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 require		
Previously Approved Design (attach copy of design) Previously Approved Operating and Maintenance Plan API Number: API Number:		
1 reviously Approved Operating and Maintenance Fran AFT Number.		
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.	drilling fluids and drill cuttings. Use attachment if more than two	
Disposal Facility Name: Controlled Recovery Inc	Disposal Facility Permit Number: NM-01-0006	
Disposal Facility Name:	Disposal Facility Permit Number:	
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 he used for future service and operation	ons:	
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 S	Subsection G of 19.15.17.13 NMAC	
Operator Application Certification:		
I hereby certify that the information submitted with this application is true, accura	to and complete to the heat of my knowledge and helicif	
Name (Print): Jerry Sherrell	• • •	
() , $()$ $()$	Title: Production Clerk	
Signature: Jeny W. Shendl	Date: 9/9/08	
e-mail address: jerrys@mackenergycorp.com	Telephone: 575-748-1288	

OCD Approval: Permit Applies on (including closure plan) Closure Plan (only) SEP 1 2 2008		
OCD Representative Signature:	Approval Date:	
OCD Representative Signature:	OCD Permit Number: P1-00438	
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:	
Closure Reports 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: Controlled Recovery Inc	Disposal Facility Permit Number: NM-01-0006	
Disposal Facility Name:		
Were the closed-loop system operations and associated activities performed on or in areas that will not be used for future service and operations? Yes (If yes, please demonstrate compliance to the items below) NO		
Required for impacted areas which will not be used for future service and operations: Site Reclamation (Photo Documentation) Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique		
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:	

Mack Energy Closed Loop System Design Plan

Equipment list,

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

Operations 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 operations all liquids, drilling fluids and cuttings will be hauled off by CRI(Controlled Recovery Inc. Permit NM-01-0006).