District I 1625 N. French Dr , Hobbs; NM 88240 District II 1301 W. Grand Avenue, Artesia, NM 88210 District III 1000 Rio Brazos Road, Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico **Energy Minerals and Natural Resources** Department Oil Conservation Division 1220 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 Pen	mit or Closure Plan Application

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 in	dividual pit, closed-loop system, below-grade tank or alternative request		
Please be advised that approval of this request does not relieve the operator of lia	bility should operations result in pollution of surface water, ground water or the		
	ply with any other applicable governmental authority's rules, regulations or ordinances.		
Operator SAMSON RESOURCES COMPANY			
	TX 79701		
Facility or well name: OSUDO 33 STATE COM #2	0. 50 5.2		
API Number: 30-0 25 · 39 18 2	OCD Permit Number. P1. D0 517		
U/L or Qtr/Qtr M Section 33 Township 20			
	Longitude 103.365321° W NAD: \ 1927 □ 1983		
Surface Owner Federal State Private Tribal Trust or Indian A	Allotment		
Pit: Subsection F or G of 19.15.17.11 NMAC	X Closed-loop System: Subsection H of 19 15.17.11 NMAC		
Temporary: Drilling Workover	☐ Drying Pad ☐ Tanks 🕱 Haul-off Bins ☐ Other		
☐ Permanent ☐ Emergency ☐ Cavitation	☐ Lined ☐ Unlined		
☐ Lined ☐ Unlined	Liner type. Thicknessmil LLDPE HDPE PVC		
Liner type: Thicknessmil	☐ Other		
Other String-Reinforced	Seams: Welded Factory Other		
Seams: Welded Factory Other	Volume:bblyd³		
Volume: bbl Dimensions: L x W x D	Dimensions: Lengthx Width		
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:	Administrative Approvals and Exceptions:		
Submittal of an exception request is required. Exceptions must be submitted to the Santa Fe Environmental Bureau office for consideration	Justifications and/or demonstrations of equivalency are required. Please refer to 19.15.17 NMAC for guidance		
of approval.	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 watercourse, 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 ☐ 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 ☐ 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			
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		
Within an unstable area. - Engineering measures incorporated into the design, NM Bureau of Geology & Mineral Resources, USGS, NM Geological Society, Topographic map	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 19.15.17.9 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. 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 19.15.17.9 NMAC Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC Design Plan - based upon the appropriate requirements of 19.15.17.12 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			
☐ Previously Approved Design (attach copy of design) API Number or Permit Number			
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. Geologic and Hydrogeologic Data (required for on-site closure) - based upon the requirements of Paragraph (3) of Subsection B of 19.15.17.9 Siting Criteria Compliance Demonstrations (required for on-site closure) - based upon the appropriate requirements of 19.15.17.10 NMAC Design Plan - based upon the appropriate requirements of 19.15.17.12 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 Previously Approved Design (attach copy of design) API Number:			
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 documents 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				
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 Type: X Drilling Workover. Emergency Cavitation Permanent Pit Below-grade Tank Closed-loop System Alternative				
Proposed Closure Method: Waste Excavation and Removal 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 cor	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	☐ Yes ☐ No ☐ NA			
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			
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			
Within 300 feet of a continuously flowing watercourse, or 200 feet of any other watercourse, 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			
Within an unstable area. - Engineering measures incorporated into the design; NM Bureau of Geology & Mineral Resources; USGS; NM Geological Society, Topographic map	Yes No			
Within a 100-year floodplain FEMA map	☐ Yes ☐ No			

Waste Excavation and Removal Closure Plan Checklist: (19.15 17.1	3 NMAC) Instructions: Fach of th	e following items must be attached to the
closure plan. Please indicate, by a check mark in the box, that the doc		e jouowing tiems must be unuched to the
Protocols and Procedures - based upon the appropriate requireme		
Confirmation Sampling Plan (if applicable) - based upon the appropriate requirement		of 19 15 17 13 NMAC
Disposal Facility Name and Permit Number (for liquids, drilling to		
Soil Backfill and Cover Design Specifications - based upon the a		n H of 19.15.17.13 NMAC
Re-vegetation Plan - based upon the appropriate requirements of		
Site Reclamation Plan - based upon the appropriate requirements	of Subsection G of 19.15.17.13 NM	AC
W. A. D. C. L. Cl. L. C. A. Tha Hall H. H.	-85 Di O (10 15 17 12 D ND	ACV F. A. Alexander DI Visit And C. A. C. 194
Waste Removal Closure For Closed-loop Systems That Utilize Haul or facilities for the disposal of liquids, drilling fluids and drill cuttings		
		NM.01.0006
Disposal Facility Name: C.R.I. On-Site Closure Plan Checklist: (19.15.17.13 NMAC) Instructions:	Disposal Facility Permit	Number: -R-9100
On-Site Closure Plan Checklist: (19.15.17.13 NMAC) Instructions:	Each of the following items must be	e 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 appr		
Proof of Surface Owner Notice - based upon the appropriate requ		
Construction and Design of Burial Trench (if applicable) based u		19.15.17.11 NMAC
☐ Protocols and Procedures - based upon the appropriate requireme ☐ Confirmation Sampling Plan (if applicable) - based upon the appr		C of 10 15 17 12 NIMAC
☐ Confirmation Sampling Plan (if applicable) - based upon the appr ☐ Waste Material Sampling Plan - based upon the appropriate requi		
Disposal Facility Name and Permit Number (for liquids, drilling the		
Soil Cover Design - based upon the appropriate requirements of S		site closure sumantus cumot de demevedy
Re-vegetation Plan - based upon the appropriate requirements of		
Site Reclamation Plan - based upon the appropriate requirements		AC
Operator Application Certification:		
I hereby certify that the information submitted with this application is to	rue, accurate and complete to the bes	t of my knowledge and belief.
Name (Print): DUKE ROUSH	mu I ANDMAN	FOR SAMSON RESOURCES COMPANY
Name (Print): DUKE ROUSH	Title: Exitation	TOR SAMISON RESOURCES COMPANY
Signature:	Date:	
e-mail address: droush@samson.com	Telephone:	(432) 683-7063
OCD Approval: Permit Application (including closure plan)		1116
OCD Approval: Permit Application (including closure plan)	Closure Plan (only)	48 /00/08
	Closure Plan (only)	Approval Date: 18 10/100
OCD Approval: Permit Application (including closure plan) OCD Representative Signature:	Closure Plan (only)	Approval Date: 18/01/08
OCD Approval: Permit Application (including closure plan)	Closure Plan (only)	Approval Date: 18/01/08
OCD Approval: Permit Application (including closure plan) OCD Representative Signature: Title: Geologist	OCD Permit Number:	Approval Date: 18/01/08
OCD Approval: Permit Application (including closure plan) OCD Representative Signature:	OCD Permit Number:_ubsection K of 19.15.17 13 NMAC	Approval Date: 18/01/08 191-00517
OCD Approval: Permit Application (including closure plan) OCD Representative Signature: Title: Geologist Closure Report (required within 60 days of closure completion): Signature Signature Closure Report (required within 60 days of closure completion): Signature Closure Report (required within 60 days of closure completion): Signature Closure Report (required within 60 days of closure completion): Signature Closure Report (required within 60 days of closure completion): Signature Closure Report (required within 60 days of closure completion): Signature Closure Report (required within 60 days of closure completion): Signature Closure Report (required within 60 days of closure completion): Signature Closure Report (required within 60 days of closure completion): Signature Closure Report (required within 60 days of closure completion): Signature Closure Report (required within 60 days of closure completion): Signature Closure Report (required within 60 days of closure completion): Signature Closure Report (required within 60 days of closure completion): Signature Closure Report (required within 60 days of closure completion): Signature Closure Report (required within 60 days of closure completion): Signature Closure Report (required within 60 days of closure completion): Signature Closure Report (required within 60 days of closure completion): Signature Closure Report (required within 60 days of closure completion)	OCD Permit Number:	Approval Date: 18/01/08 191-00517
OCD Approval: Permit Application (including closure plan) OCD Representative Signature: Title: Geologist Closure Report (required within 60 days of closure completion): St	OCD Permit Number: ubsection K of 19.15.17 13 NMAC Closure Completion	Approval Date: 18/01/08 191-00517
OCD Approval: Permit Application (including closure plan) OCD Representative Signature: Title: Geologist Closure Report (required within 60 days of closure completion): State Closure Method: Waste Excavation and Removal On-Site Closure Method	OCD Permit Number: ubsection K of 19.15.17 13 NMAC Closure Completion	Approval Date: 18/01/08 191-00517
OCD Approval: Permit Application (including closure plan) OCD Representative Signature: Title: Geologist Closure Report (required within 60 days of closure completion): State of the State of Closure Method: Waste Excavation and Removal On-Site Closure Method If different from approved plan, please explain.	OCD Permit Number: ubsection K of 19.15.17 13 NMAC Closure Completion Alternative Closure Method	Approval Date: 10/0/100
OCD Approval: Permit Application (including closure plan) OCD Representative Signature: Title: Geologist Closure Report (required within 60 days of closure completion): State of Closure Method: Waste Excavation and Removal On-Site Closure Method If different from approved plan, please explain. Closure Report Attachment Checklist: Instructions: Each of the following Closure Report Attachment Checklist: Instructions: Each of the following Closure Report Attachment Checklist: Instructions: Each of the following Closure Report Attachment Checklist: Instructions: Each of the following Closure Report Attachment Checklist: Instructions: Each of the following Closure Report Attachment Checklist: Instructions: Each of the following Closure Report Attachment Checklist: Instructions: Each of the following Closure Report Attachment Checklist: Instructions: Each of the following Closure Report Attachment Checklist: Instructions: Each of the following Closure Report Attachment Checklist: Instructions: Each of the following Closure Report Attachment Checklist: Instructions: Each of the following Closure Report Attachment Checklist: Instructions: Each of the following Closure Report Attachment Checklist: Instructions: Each of the following Closure Report Attachment Checklist: Instructions: Each of the following Closure Report Attachment Checklist: Instructions: Each of the following Closure Report Attachment Checklist: Instructions: Each of the following Closure Report Attachment Checklist: Instructions: Each of the following Closure Report Attachment Checklist: Instructions: Each of the following Closure Report Attachment Checklist: Instructions: Each of the following Closure Report Attachment Checklist: Instructions: Each of the following Closure Report Attachment Checklist: Instructions: Each of the following Closure Report Attachment Checklist: Instructions: Each of the following Closure Report Attachment Checklist: Instructions: Each of the following Closure Report Attachment Checklist: Each of the following Closure	OCD Permit Number: ubsection K of 19.15.17 13 NMAC Closure Completion Alternative Closure Method	Approval Date: 10/0/100
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OCD Approval: Permit Application (including closure plan) OCD Representative Signature: Title: Geologist Closure Report (required within 60 days of closure completion): State Closure Method: Waste Excavation and Removal On-Site Closure Method If different from approved plan, please explain. Closure Report Attachment Checklist: Instructions: Each of the followark in the box, that the documents are attached. Proof of Closure Notice Proof of Deed Notice (if applicable)	OCD Permit Number: ubsection K of 19.15.17 13 NMAC Closure Completion Alternative Closure Method	Approval Date: 10/0/100
OCD Approval: Permit Application (including closure plan) OCD Representative Signature: Title: Geologist Closure Report (required within 60 days of closure completion): State Closure Method: Waste Excavation and Removal On-Site Closure Method If different from approved plan, please explain. Closure Report Attachment Checklist: Instructions: Each of the followark in the box, that the documents are attached Proof of Closure Notice Proof of Deed Notice (if applicable) Plot Plan	OCD Permit Number: ubsection K of 19.15.17 13 NMAC Closure Completion Alternative Closure Method	Approval Date: 10/0/100
OCD Approval: Permit Application (including closure plan) OCD Representative Signature: Title: Geologist Closure Report (required within 60 days of closure completion): State Closure Method: Waste Excavation and Removal On-Site Closure Method If different from approved plan, please explain. Closure Report Attachment Checklist: Instructions: Each of the followark in the box, that the documents are attached. Proof of Closure Notice Proof of Deed Notice (if applicable) Plot Plan Confirmation Sampling Analytical Results	OCD Permit Number: ubsection K of 19.15.17 13 NMAC Closure Completion Alternative Closure Method	Approval Date: 10/0/100
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OCD Approval: Permit Application (including closure plan) OCD Representative Signature: Title: Geologist Closure Report (required within 60 days of closure completion): State Excavation and Removal On-Site Closure Method If different from approved plan, please explain. Closure Report Attachment Checklist: Instructions: Each of the followark 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 Permit Number:	Approval Date:
OCD Approval: Permit Application (including closure plan) OCD Representative Signature: Title: Geologist Closure Report (required within 60 days of closure completion): State Excavation and Removal On-Site Closure Method If different from approved plan, please explain. Closure Report Attachment Checklist: Instructions: Each of the followark 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 Permit Number:	Approval Date:
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OCD Approval:	OCD Permit Number: ubsection K of 19.15.17 13 NMAC Closure Completion Alternative Closure Method Clowing items must be attached to the Longitude c closure report is true, accurate and conditions specific	Approval Date:
OCD Approval:	OCD Permit Number: ubsection K of 19.15.17 13 NMAC Closure Completion Alternative Closure Method Clowing items must be attached to the Longitude c closure report is true, accurate and conditions specific	Approval Date:
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OCD Approval:	OCD Permit Number:	Approval Date:

CLOSED LOOP SYSTEM

Design Plan

Equipment list

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 operations all liquids, drilling fluids and cuttings Will be hauled off via CRI (Controlled Recovery Incorporated Permit R-9166).

Completion

1-Steel tank for flowback 1-Steel tank for cleanout Fluids Disposed by CRI Permit R-9166 Solids Disposed at CRI