FEB 1 0 2009

State of New Mexico RECEIME Minerals and Natural Resources 1301 W Grand Avenue, Artesia, NM 88210

<u>District III</u> 1000 Rio Brazos Road, Aztec, NM 87410

1625 N French Dr., Hobbs, NM 88240

District I

FEB 12 2009Oil Conservation Division 1220 S St Francis Dr., Santa Fe, NM 875 OBBSOCD 220 South St. Francis Dr.

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.

Form C-144 CLEZ

July 21, 2008

## 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 second content of the 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 hability environment. Nor does approval relieve the operator of its responsibility to comply with the complex of the responsibility to comply with the complex with the complex with the complex of the complex of the complex with the complex of the complex	ith any other applicable governmental authority's rules, regulations or ordinances.
Operator: ConocoPhillips Company Address: P.O. Box 51810, Midland, Texas 79710-1810 Facility or well name: Warren Unit #22  API Number: 30-025-07854  U/L or Qtr/Qtr  Section 29  Township 20S  Center of Proposed Design: Latitude	217817
Operator: P.O. Box 51810 Midland Texas 79710-1810	OGRID#:211011
Address: Warren Unit #22	
APL Number: 30-025-07854	Permit Number: P1. DD933
LI/I or Otr/Otr 29 Township 20S	Range 38E County Lea
Center of Proposed Design: LatitudeLon	eitude NAD: ☐1927 ☐ 1983
Surface Owner:   Federal ☐ State ☐ Private ☐ Tribal Trust or Indian Allotr	
2.	
Closed-loop System: Subsection H of 19.15.17.11 NMAC	
Operation: Drilling a new well Workover or Drilling (Applies to activities	es 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 emerger	ncy telephone numbers
☑ Signed in compliance with 19.15.3.103 NMAC	
4. Closed-loop Systems Permit Application Attachment Checklist: Subsection	n 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 NM	MAC
Operating and Maintenance Plan - based upon the appropriate requiremen Closure Plan (Please complete Box 5) - based upon the appropriate requirement.	nts of 19.15.17.12 NMAC rements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC
	<del></del>
Previously Approved Operating and Maintenance Plan API Number:	
Waste Removal Closure For Closed-loop Systems That Utilize Above Ground	
Instructions: Please indentify the facility or facilities for the disposal of liquid facilities are required.	
Disposal Facility Name: Controlled Recovery	Disposal Facility Permit Number: R9166 Nm D L DOOK
Disposal Facility Name:	Disposal Facility Permit Number:
Will any of the proposed closed-loop system operations and associated activities  ☐ Yes (If yes, please provide the information below) ☑ No	s occur on or 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 operal  Soil Backfill and Cover Design Specifications based upon the appropri  Re-vegetation Plan - based upon the appropriate requirements of Subsecti  Site Reclamation Plan - based upon the appropriate requirements of Subsections.	iate requirements of Subsection H of 19.15.17.13 NMAC ion I of 19.15.17.13 NMAC
6. Operator Application Certification:	
I hereby certify that the information submitted with this application is true, accu	urate and complete to the best of my knowledge and belief.
Name (Print): Justin C. Firkins	Title: Regulatory Specialist
Signature: Justice Jack	Date: 01/30/2009
e-mail address: Justin.c.firkins@conocophillips.com	Telephone: 432-688-6913

OCD Approval: Permit Application (including closure plan) Closure Plan (only)					
OCD Representative Signature:	Approval Date: 2/20/09				
Title: Geologist	OCD Permit Number: P1-05933				
8.  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.					
9	Closure Completion Date:				
Closure Report Regarding Waste Removal Closure For Closed-loop Systems Instructions: Please indentify the facility or facilities for where the liquids, drift 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 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 operated 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 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:				

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<u>District_I</u>	

#### State of New Mexico

FEB 1 0 2009

Form C-102

1625 N. French Dr., Hobbs, NM 88240

Energy Minerals & Natural Resources Department
OIL CONSERVATION DIVISION District II
1301 W. Grand Avenue, Artesia, NM 88210

Revised October 12, 2005

Submit to Appropriate District Office

State Lease - 4 Copies Fee Lease - 3 Copies

District III 1000 Rio Brazos Rd., Aztec, NM 87410

FEB 1 2 2009 1220 South St. Francis Dr. Santa Fe, NM 87505

<u>District IV</u> 1220 S. St. Francis	Dr., Santa F	Fe, NM 87505	BBSC	OCD	Santa Fe, NI	VI 873U3			AMENDED REPORT
		W	ELL LC	CATIO	N AND ACR	EAGE DEDIC	ATION P	LAT	
<sup>1</sup> API Number <sup>2</sup> Poo			<sup>2</sup> Pool Code	Code <sup>3</sup> Pool Name					
30-025-07854 630			63080	80 Warren: Drinkard					
<sup>4</sup> Property (	Code	<sup>5</sup> Property Name					<sup>6</sup> Well Number		
		Warren Unit 22					22		
7 OGRID	No.	<sup>8</sup> Operator Name							<sup>9</sup> Elevation
217817		ConocoPhillips Company 3519' GR					3519' GR		
					<sup>10</sup> Surface I	Location	•		
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
J	29	208	38E		2090	South	2090	West	Lea, NM
<u> </u>			11 Bo	ttom Ho	le Location If	Different From	n Surface		
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from	the East/Wes	t line County
12 Dedicated Acres	s 13 Joint o	r Infill 14 C	onsolidation (	Code 15 Or	der No.		1. 1. 2.7		
40									

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

***************************************	
16	17 OPERATOR CERTIFICATION  I hereby certify that the information contained herein is true and complete
	to the best of my knowledge and belief, and that this organization either
	owns a working interest or unleased mineral interest in the land including
	the proposed bottom hole location or has a right to drill this well at this
	location pursuant to a contract with an owner of such a mineral or working
	interest, or to a voluntary pooling agreement or a compulsory pooling
	order heretofore entered by the division
	Justil Jala 01/28/2009
	Signature Date
	1051
	Justin C Firkins Printed Name
	10
	<sup>18</sup> SURVEYOR CERTIFICATION
- WARREN UNIT 22 -	I hereby certify that the well location shown on this
0	plat was plotted from field notes of actual surveys
	made by me or under my supervision, and that the
	same is true and correct to the best of my belief
$T_{L}$	
	Date of Survey
	Signature and Seal of Professional Surveyor:
	Signature and Seat of Professional Surveyor.
	Certificate Number

ConocoPhillips Company P.O. Box 51810 Midland, TX 79710-1810



# Closed-Loop System (Above-Ground Steel Tanks) Design/Operating & Maintenance/Closure Plan Production Operations within Southeast New Mexico 12/2008

## **Equipment Available for Use**

(Photographs showing the type of vessels that may be used are attached)

LTR Frac Tank – 10'6" wide, 11'8" tall, 38'6" long, 500 Bbl. LTR ½ Tank – 10'6" wide, 7'8" tall, 38'6" long, 250 Bbl. Stallion Tank – 8'65" wide, 9'8" tall, 46' long, 500 Bbl. Matador Tank – 8' wide, 8'5" tall, 42'10" long, 500 Bbl.

Open-top with gas buster (30' long, 6'-4' deep, 8' wide, 260 Bbl.)

### **Operation and Maintenance**

Steel tanks: The closed loop system components will be inspected daily by each shift and any needed repairs will be made immediately. Any leak in the system will be repaired immediately and any spilled liquids and/or solids will be cleaned up immediately, and the area where any such spill occurred will be remediated immediately.

OCD, Hobbs office, will be notified per Statewide Rule 116.

#### Closure Plan

During recompletion/remedial operations, all liquids/fluids will be transported off location via:

1. Cuttings and solids will be removed from location in haul-off bins by an authorized contractor and disposed of at an authorized facility. For this well, we propose the following disposal facility:

Controlled Recovery Inc, 4507 West Carlsbad Hwy, Hobbs, NM 88240, P.O. Box 388 Hobbs, New Mexico 88241 Toll Free Phone: 877.505.4274, Local Phone Number: 432-638-4076

The physical address for the plant where the disposal facility is located is Highway

62/180 at mile marker 66 (33 miles East of Hobbs, NM and 32 miles West of Carlsbad, NM).

The Permit Number for CRI is R9166

- 2. **Mud** will be transported by vacuum truck and disposed of at Controlled Recovery Inc at the facility described above.
- 3. Fresh Water and Brine will be hauled off by vacuum truck and disposed of at an authorized salt water disposal well. We propose the following for disposal of fresh water and brine as needed:
  - Nabors Well Services Company, 3221 NW County Rd, Hobbs, NM 88240, PO 5208 Hobbs, NM, 88241, Permit SWD 092. (Well Location: Section 3, T19S R37E)
  - Basic Energy Services, PO Box 1869 Eunice, NM 88231 Phone Number 575 394 2545, Facility located at Hwy 18, Mile Marker 19, Eunice, NM.
  - Key Energy Services, 2105 Avenue O, Eunice, NM 88231, Phone Number 505 394 2585 (Atha Well, Section 31 T21S R36E, BLM Permit # LC036441) (Christmas Well, Unit B, Section 28, T22S R37E, State Permit # SWD # 606)











