District 1 1625.N. French Dr., Hobbs, NM 8824 RECEIVED winerals and Natural Resources 26 ZUU9

State of New Mexico

Department

Form C-144 CLEZ July 21, 2008

District IV 1220 S. St. Francis Dr., Santa Fe, NM 8750BBSOCD

Santa Fe, NM 87505

Department

District III

DOI Rio Brazos Road, Aztec, NM 87410

District IV

Distri

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 | Please submit one application (Form C-144 CLEZ) per liquividual 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 wat environment. Nor does approval relieve the operator of its responsibility to comply with any other applicable governmental authority's ru	er, ground water or the iles, regulations or ordinances.		
Operator: Chesapeake Operating, Inc. OGRID #: 147179			
Address: P.O. Box 18496 Oklahoma City, OK:73154-0496			
Facility or well name: I-A Akens # 14			
API Number: 30-025-29872 / OCD Permit Number: PI-DD	58		
U/L or Qtr/Qtr W . Section 3 Township 21 South Range 36 East County: Lea			
	NAD: 🔯 1927 🔲 1983		
Surface Owner: Federal State Private Tribal Trust or Indian Allotment	AVÍN: MISEL ET 1865		
[,2.			
[X] Closed-loop System: Subsection H of 19.15.17.11 ΝΜΛΟ			
Operation: Drilling a new well Workover or Drilling (Applies to activities which require prior approval of a permit or notice of intent) X 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	to pate the source of the		
Instructions: Each of the following Items must be attached to the application. Please indicate, by a check mark in the box, the attached.	iat lite documents are		
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 a	nd 19.15.17.13 NMAC		
Previously Approved Design (attach copy of design) API Number:	•		
Previously Approved Operating and Maintenance Plan API Number:			
5. Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only: (19.15.	17 12 DÎNMACÎ		
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: Controlled Recovery, Inc. Disposal Facility Permit Number: NM-01	· · · · · · · · · · · · · · · · · · ·		
Disposal Facility Name: Sundance Disposal Disposal Facility Permit Number: NM-01			
Will any of the proposed closed-loop system operations and associated activities occur on or in areas that will not be used for fut Yes (If yes, please provide the information below) [X] No	uře service and operations?		
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 Re-vegetation Plan - based upon the appropriate requirements of Subsection 1 of 19.15.17.13 NMAC	INMAC		
Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC			
6. Operator Application Certification:	0.00.00.00		
Libereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief.			
Name (Print): Bryan Arrant Title: Sr. Regulatory Compl. Spec			
Signature: Date: 03/04/2009	** 		
	·		
e-mail address: bryan.arrant@chk.com Telephone: (405)935-3782	<u> </u>		

OCD Approvál: Permit Application (including closure plan) Clos	sure Plan (only)	MAD - 5 000
OGD Representative Signature:	Approval Date:	MAR 0 5 2009
Title: DISTRICT 1 SUPERVISOR	QCD Permit Number: P1	00958
a. Closure Report (required within 60 days of closure completion): Subso Instructions: Operators are required to obtain an approved closure plan p The closure report is required to be submitted to the division within 60 da section of the form until an approved closure plan has been obtained and	prior to implementing any closure activities and s ys of the completion of the closure activities. Plea	ase do nổt cómplete this
9. Closure Report Regarding Waste Removal Closure For Closed-loop Sy Instructions: Please Indentify the facility or facilities for where the liquid	stems That Utilize Above Ground Steel Tanks of the steel Tanks of the steel Tanks of the steel that the steel the st	ór <u>Haùl-off Binš Only</u> : Use attachment if more than
two facilities were utilized.	Diamaid Faillin Dannid Northani	,
Disposal Facility Name:	Disposal Facility Permit Number: Disposal Facility Permit Number:	
Were the closed-loop system operations and associated activities performed Yes (If yes, please demonstrate compliance to the items below)	on or in areas that will not be used for future servi	itë and operations?
Required for impacted areas which will not be used for future service and o 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 clobelief. I also certify that the closure complies with all applicable closure red Name (Print): Attached Signature:		di dosure plan
nothing to hand	sto surface -	therefore
,		
Jume W. Lid D	ISTRICT 1 SUPERVISOR	APR 06 2009

Chesapeake Operating, Inc.'s Closed Loop System J.A. Akens # 14 Unit W, Sec. 3, T-21-S R-36-E Lea Co., NM API #: 30-025-29872

Equipment & Design:

Chesapeake Operating, Inc. is to use a closed loop system in the plug & abandonment of this well.

(1) 250 bbl frac tank

Operations & Maintenance:

During each and every tour, the rig's drilling crew will inspect and closely monitor the drilling fluids contained within the steel tank and visually monitor any spill which may occur:

Within 48 hours should a spill, release or leak occur, the NMOCD District I office in Hobbs (575-393-6161) will be notified. Please note that notifications may be made earlier to the district office should a greater release occur.

This is in keeping with the reporting requirements of NMOCD's rule 19.15.29.8

Closure:

After re-completion operations, fluids will be hauled and disposed to the Controlled Recovery, Inc.'s (CRI) location.

The disposal permit number for CRI is: NM-01-0006

Should this facility not be available, Sundance Disposal is the alternative site.

The permit # for this facility is: NM-01-0003.