District 1 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 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.

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

### Santa Fe, NM 87505 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: X 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: Herman Loeb LLC OGRID #:264953 Address: PO Box 838 Lawrenceville, Ill. 62439. Facility or well name: Shahan 33-3 OCD Permit Number: P1 - 01547 30-025-118787 API Number: U/L or Qtr/Qtr A Section 33 Township 25S Range 37E County: Lea\_ Center of Proposed Design: Latitude Longitude NAD: □1927 □ 1983 Surface Owner: Federal State X Private Tribal Trust or Indian Allotment X 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) X P&A X 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 X 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. X Design Plan - based upon the appropriate requirements of 19.15.17.11 NMAC X Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC X 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: 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: Sundance Disposal Facility Permit Number: NM 01-0003 Disposal Facility Name: \_Controlled Recovery Inc.\_\_ Disposal Facility Permit Number: NM 01-0006 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 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 1 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, accur	
Name (Print): Michael Polley	Title: Agent for Nerman Loeb LLC
Signature Pull	Date: / マーダー 8 9
e-mail address: pa polley ms & g mails com	Telephone: 719 - 342 - 5400
OCD Approval: Permit Application (including closure plan) Closure P	Plan (only)
OCD Representative Signature:	Approval Date: 12/8/2009
Title: Compliance Officer	OCD Permit Number: P1-01547
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, dri two facilities were utilized.	lling fluids and drill cuttings were disposed. Use attachment if more than
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) \(\sigma\) 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): Michael Polley Title: Agent for Herman Loeb LC	
Signature: Mulan Holly Date: 12-4-09	
e-mail address: polley mr @g mail. Com Telephone: 7/9- 342- 5400	

# Herman Loeb, LLC

Shahan 33-3

Unit G Sec. 33, T-25S, R-37E

Lea Co., NM.

API#: 30-025-11877

Equipment & Design:

Herman Loeb, LLC will use a closed loop system in the plug and abandonment of this well. The following equipment will be on location.

## (1) 500 bbl steel frac tank.

Operations & Maintenance:

During each day of operation, the rig's crew will inspect and closely monitor the fluids contained within the steel tank and visually monitor any release that may occur. Should a release, spill or leak occur, the NMOCD District 1 office Hobbs (575-393-6161) will be notified, as required in NMOCD's rule 19.15.29.8.

#### Closure:

After plugging operations, fluids and solids will be hauled and disposed at Sundance disposal's location, permit number NM 01-0003. Secondary site will be Controlled Recovery Inc.'s (CRI) location, permit number NM 01-0006.