# State of New Mexico

Form C-144 CLEZ July 21, 2008

State of New Mexico

15 N. French Dr., Hobbs, NM 88240

17 W. Grand Avenue, Artesia, NM 88240

18 Department

18 Department

19 Oil Conservation Division

10 State of New Mexico

10 Department

10 Conservation Division

1220 South St. Francis Dr.

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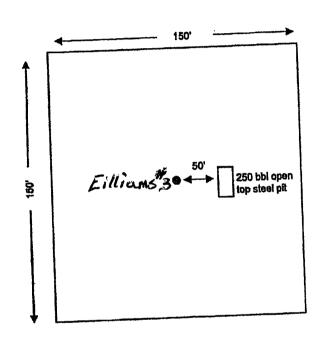
1220 Santa Fe, NM 87505

For closed-loop systems that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure, submit to the appropriate NMOCD District Office.

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
nstructions: Please submit one application (Form C-144 CLEZ) per individual closed-loop system request. For any application request other than for a osed-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.
se 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 ronment. Nor does approval relieve the operator of its responsibility to comply with any other applicable governmental authority's rules, regulations or ordinances.
Derator: Lonoco Philips Company OGRID#: 217817  Idress: Po Box 5/8/0 midland Tx 79210 - 1810  Idrigity or well name: E Illians #3
idress: Po Box 518 10 midland Tx 79210-1810
Cility or well name:
Pl Number: 30-025 7770 OCT Fermit Number: 100 County:
enter of Proposed Design: Latitude 32, 142017 405405 Longitude 65.657396666526 NAD: 1927 1983  urface Owner: Federal X State Private Tribal Trust or Indian Allotment
irface Owner: Federal XI State Frivate Fridat of Indian Floation
Closed-loop System: Subsection H of 19.15.17.11 NMAC  peration: 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 M Haul-off Bins
igns: 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
Iosed-loop Systems Permit Application Attachment Checklist: Subsection B of 19.15.17.9 NMAC  ***structions: Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the documents are ttached.  **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  **Operating and Maintenance 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 Operating and Maintenance Plan API Number:
Vaste 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 acilities are required.  Disposal Facility Name: Disposal Facility Permit Number: Disposal Facility Permit Number: Processor Dis
Vill 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
Re-vegetation Plan - 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 Subsection G of 19.15.17.13 NMAC
Operator Application Certification:
I hereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief.
Name (Print): 6 Asy Fac 105 ton Title: Moll
Planeting Such Such Such Such Such Such Such Such
Signature: Talanhana:

DApproval: Permit Application (including closure plan) Closure Plan (only)		
D Representative Signature:	Approval Dates 5-4-16	
le:	OCD Permit Number: P1-01992	
sure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC tructions: Operators are required to obtain an approved closure plan prior to implementing any closure activities and submitting the closure report. e 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 tion of the form until an approved closure plan has been obtained and the closure activities have been completed.		
	Closure Completion Date:	
sure Report Regarding Waste Removal Closure For Closed-loop Systems' tructions: Please indentify the facility or facilities for where the liquids, drilled facilities were utilized.	ing fluids and drill cuttings were disposed. Use attachment if more than	
Pisposal Facility Name:	Disposal Facility Permit Number:	
Disposal Facility Name:	Disposal Facility Permit Number:	
re 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) \( \subseteq \text{No} \)		
quired 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		
erator Closure Certification: reby certify that the information and attachments submitted with this closure report is true, accurate and complete to the best of my knowledge and ief. I also certify that the closure complies with all applicable closure requirements and conditions specified in the approved closure plan.		
me (Print):	Title:	
nature:	Date:	
nail address:	Telephone:	

Energen Resources Corporation Stuart Langlie Mattix Unit Well No. 107 30-025-11411 Section 2, T25S, R37E, Lot N Lea County, New Mexico



All distances approximate Not to scale

## i. Design Plan

Above ground steel tanks will be used for the management of all workover fluids.

## II. Operations and Maintenance Plan

Devon will operate and maintain all of the above ground steel tanks involved in workover operations in a prudent manner to prevent any spills. If a leak develops, the appropriate division district office will be notified within 48 hours of the discovery and the leak will be addressed. During an upset condition the source of the spill is isolated and addressed as soon as it is discovered. Free liquids will be removed and loose topsoil will be used to stabilize the spill. The contaminated soil will be either bio-remediated or excavated and taken to an agency approved disposal facility.

### III. Closure Plan

All workover fluids will go to above ground steel tanks and will be hauled by various trucking companies to an agency approved disposal facility.

Impacted areas which will not be used for future service or operations will be reclaimed and reseeded as stated in the APD.

# Conoco Philips Copany Filliams #3 UnitiEisec.34.T.17.5, R-35-E

lea Co., NM

API#: 30-025-01110

# Equipment & Design:

State of NM (formerly Yeso Energy, Inc) will use a closed loop system in the plug and abandonment of this well. The following equipment will be on location:

(1) 250 bbl steel reverse 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 Gandy-Marley Disposal's location, permit number NM 01-0019. Secondary site will be CRI Disposal, permit number NM R9166