District I RE EIVEL <sup>1</sup> Sta	ate of New Mexico	
1625 N. French Dr., Hobbs, NM 88240 District H	nerals and Natural Resources	Form C-144 C July 21.
1301 W Grand Avenue, Artesia, NM 88210 FEB Z 5 2000	Department	For closed-loop systems that only use above
District III 1000 Rio Brazos Road, Aztec, NM 87410 HOBBSOCIOIl C District IV 1220	Conservation Division	ground steel tanks or haul-off hins and pror
		to implement waste removal. for closure, sub to the appropriate NMOCD District Office
52	inta Fe, NM 87505	
Closed-Loop System	Permit or Closure Plan	1 Application
(that only above ground steel tanks or hau		nt waste removal for closure)
	tion: Permit Closure	
Instructions: Please submit one application (Form C-144 CLEZ) per closed-loop system that only use above ground steel tanks or haul-off	individual closed-loop system requi	est. For any application request other than for a
lease be advised that approval of this request does not relieve the operator	or of liability should operations result	in collision of success water
invironment. Nor does approval relieve the operator of its responsibility to	comply with any other applicable go	vernmental authority's rules, regulations or ordinar
Operator <u>Mack Energy Corporation</u>		013837
Address. P.O. Box 960 Artesia, NM 88210-0960	OGRID # _	010037
Facility or well name Jerry State #1 77603		D. C.
API Number: <u>30-003-24186</u>	OCD Permit Number	F-23242
U/L or Qtr/Qtr L Section 21 Township	15SRange 31E	County Chaves
Center of Proposed Design: Latitude	Longitude	NAD: 1927 1983
Surface Owner: Federal State Private Tribal Trust or I	Indian Allotment	<b>_</b> _
2		
Closed-loop System: Subsection H of 19.15.17.11 NAIAC		
Operation: Drilling a new well Workover or Drilling (Appli	es to activities which require prior a	approval of a permit or notice of intent) P&A
Above Ground Steel Tanks or 🔀 Haul-off Bins		
3 Sime Submersion C - C10 16 17 11 20 64 C		n and a second
Sign: Subsection C of 19.15.17.11 NMAC		
12" x 24", 2" lettering, providing Operator's name, site location,	and emergency telephone numbers	
	and emergency telephone numbers	
12" x 24", 2" lettering, providing Operator's name, site location,         Signed in compliance with 19.15.3.103 NMAC		
12" x 24", 2" lettering, providing Operator's name, site location,     Signed in compliance with 19.15.3.103 NMAC     Closed-loop Systems Permit Application Attachment Checkli Instructions: Each of the following items must be attached to the operatory of the op	ist: Subsection B of 1915 179 NMA	<b>(</b>
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QDLALDEDERSE       Approval Date:       LS_1/2.5/11/1         THE       GEOIDGISE       OCD Permit Number:	<u>ب</u>	()	÷	(	.» متعمر :	
Title:	7 OCD Approval: Rermit Apj	plies on (including closure	plan) 🔲 Closure I	Plan (only)	· · · · · · · · · · · · · · · · · · ·	··· · ·
Title	OCD Representative Signature	- 23	2 ang		Approva	Date: 05/25/11
Instructions: Operators are regulated to obtain an approval closure plan prior to implementing any closure activities and submitting the closure report. The closure report of the completion of the closure activities. Planes do not complete this section of the form until an approval closure plan has been obtained and did closure activities have been completed.  Closure Report: Reparting Waste Removal Closure for Close-Hoop Systems That Utilize Above Granid Steel Traks or Hadriff or foreithan and functions: Plane Indentify the facility or facilities for where the liquid, adding fulds and adding close disposed. Use attractment of more than any facility or facility or facilities or where the liquid, adding fulds and adding close disposed. Use attractment of more than any facility or facility	Title:Ge	ologist		OCD Permit Num		
Closure Reports Reparating Waste Remoted Closure for Obsert the liquids, drilling fluids and drill cuttings were disposed. Use diffections of more than boy facilities were unified.         Disposal Facility Name:	Instructions: Operators are real	uired to obtain an approved	l closure plan prior	to implementing any the completion of the losure activities have	closure activiti closure activiti been complete	es. Please do not complete this L
Were the closed-loop system operations and associated activities performed on or in areas that will not be used for future service and operations?         Pres (1/se, please demonstrate compliance to the terms below    NO         Repaired for impacted areas which will not be used for future service and operations?         Soil Backfulling and Cover Installation         Percentry that the information and attachments submitted with this closure report is true, accurate and complete to the best of my knowledge and blef. I also certify that the closure complies with all applicable closure requirements and conditions specified in the approved closure plan.         Name (Print):	Instructions: Please indentify the two facilities were utilized.	e facility or facilities for wh	iere the liquids, dri	s That Utilize Aboye lling fluids and drill	Ground Steel cuttings were d	Tanks or Haul-off Bins Only: isposed. Use attachment if more t
Remind for impacted areas which will not be used for future service and operations:         Soil Backfilling and Cover itsiallation         Boy Backfilling and Cover itsiallation         Thereby certify that the information and attachments submitted with this closure report is true, accurate and complete to the best of my knowledge and bleft. I also certify that the closure complices with all applicable closure requirements and conditions specified in the approved closure plan.         Name (Print):	Were the closed-loop system oper	rations and associated activit	ties performed on or	r in areas that will not	be used for fut	re service and operations?
Operating Closure Certification:         I hereby certify that the information and attachments submitted with this closure requirements and conditions specified in the approved closure plan.         Name (Print):	Required for impacted areas which Site Reclamation (Photo D Soil Backfilling and Cover Re-vegetation Application	ch will not be used for future ocumentation) Installation	e service and operat	ions ·		
Delife. 1 also certuly that the closure completes with all applicable closure requirements and conditions specified in the approved closure plan.         Name (Print):	<b>Operator Closure Certification:</b>					
Nane (Print):	I hereby certify that the information belief. I also certify that the close	on and attachments submitte sure complies with all appl	d with this closure i icable closure requ	report is true, accurate irements and condition	and complete t	o the best of my knowledge and
Signature: Date:			,			a ne appreted closure plan.
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	Signature	•		Ď-t	• •	. •
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Farm C-1-14 Oil Conservation Division	e-mail address:			• •		
Farm C-144 Oil Conservation Division	e-mail address:			• •		
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## Mack Energy Closed Loop System Design Plan

Equipment list,

### 2-414 Swaco Centrifuges

#### 2-4 screen Mongoose shale shakers

- 2- CRI Bins with track system
- 2- 500 BBL frac tanks for fresh water
- 2- 500 BBL frac tanks for brine water

# **Operations 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 by CRI(Controlled Recovery Inc. Permit NM-01-0006).