

APPLICATION FOR A LIQUID WASTE PERMIT OR REGISTRATION

A (2-7-7-7)

A (2-7-7-7) **NMED Permit Number:**

LWP-RU-10-0089

Date NMED Received:

NMED Use Only:
Call 258-3272 to schedule an inspection a minimum of 2 working days prior to the inspection. Permit Fee: 450 co
Permit Approved for (circle one): 1 2 3 4 5 6 Bedrooms Multiple dwellings Other: Store 1514 Performs

on indicate 100 gpd. Owner agrees to install 1: 10/20/2009 1at Date or Subdivision Date) X Warranty deed Property tax reconstructions Other, specify:	A. Proposed liquid waste system use and design flow: Single family residence no. of bedrooms Multiple family units no. of units; no. bedrooms per unit Seasonal residence X Commercial/Institutional (type): Other (type): B. Are there other sewage sources on this property? Yes X No 0 gpd		TOWNSHIP RANGE SECTION QTR QTR QTR LATITUDE LONGITUDE ELEV INSTALLER'S NAME & FIRM: Jace Ensor, Mountain Top Inc. Jace Ensor, Mountain Top Inc. MAILING ADDRESS: Street/PO Box City Ruidoso NM 88345 CID License No./Class MM-1MM-98MS-1X MS-3Homeowner	DDRESS: StreetPO Box, City State Zip Corial Rd, Ste 1410 Oklahoma City OK 73134 CATION: Address, City, ZIP, County - (if needed, attach directions) Capitan, NM 88316 Lincoln UNIT/PHASE BLOCK LOT/TRACE Subd 5 3 ROPERTY CODE: 4076050060135	SYSTEM OWNER'S NAME: Last, First, MI Home Phone: Business Phone:
Trench or Bed width = Gravel depth below pipe = Total Trench or Bed Length = Length of Trenches = (1) Number of Gravelless Units = 144 Proposed Absorption Area of Syst D. Depth from ground surface to bott	Irrigation Low pressure dosed Drip Gray water X Other (specify): 140' E-Z flow 4 high Materials: Pipe & Gravel Gravelless (type): Distribution box: X Yes No C. Minimum required absorption area: AR 2	ication No: NM977202 Advanced Treatment System) Secondary Tertia Sinfection Other (specify): Model: Intary ATS System: Trench Leaching Bed Holding tank Elevated Bed I inch Evancetaring for (FT) Bed	Irrigation well, or flood irrigated area on lot? Yes No State Engineer Well Permit #: Name of Public Water System: Village of Capitan IV. SYSTEM DESIGN A. Treatment Unit: X Septic tank Manufacturer: Mountain Top Inc. 1250	y	B. Depth from Ground Surface to: Seasonal High Water Table 100 feet

ion ditches, arroves and surface waters within 200 feet of the system, and the direction of groundwater flow.	, diagram or picture file of the lot and liquid waste system. Show setback distances from both the tank and disposal field to property lines, buildings, s	NMED Permit Number:
	s, structures,	

<

SITE PLAN: Attach plat

ĭ. provisions of the New Mexico Plumbing Code and the New Mexico Liquid Waste Disposal and Treatment Regulations. Obtaining this permit does not relieve me from the responsibility of obtaining The foregoing information is correct and true to the best of my knowledge. I understand the issuing of this permit does not relieve me from the responsibility of complying with all applicable A plat, drawing or picture, including setback distances, in accordance with 20.7.3.302:

Signature Contractor Other, specify: 6-22-10

Nate

any permit required by state, city or county regulation or ordinance or other requirements of state or federal law.

VII. NMED PERMIT TO CONSTRUCT (For Registrations, ATS Ownership Transfer, or Permitting of Existing Unpermitted Systems installed after February 1, 2002 skip this section and go to Section VIII):

A permit for construction of the liquid waste disposal system described herein is hereby:

Permit Conditions or Reasons for Denial: Granted subject to conditions SWOOTHON

This permit may be canceled for failure to meet any condition specified: failure to complete the system within one year; for providing inaccurate or incomplete information; or for failure to notify NMED to schedule an inspection, a minimum of 2 working days prior to the inspection.

If you have questions call:

VIII. NMED FINAL APPROVAL TO OPERATE LIQUID WASTE SYSTEM:

The system described above: was inspected by NMED Contractor photo inspection authorized

NMED Inspection History

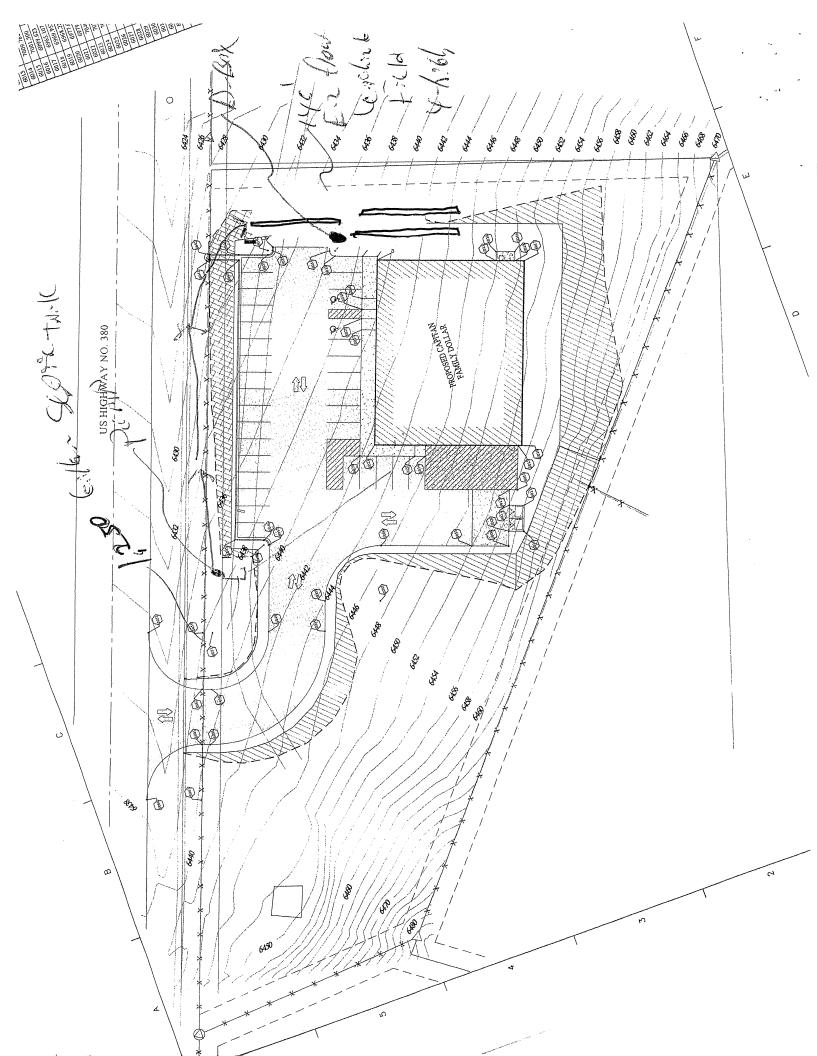
A permit for operation of the liquid waste disposal system described herein is hereby:

Granted ____Granted subject to conditions _____Denied

Conditions of Approval

NATED Representative

Date Date



WARRANTY DEED

RACCOON INVESTMENTS, LLC, a New Mexico Limited Liability Company for consideration paid, grant(s) to TDG CAPITAN, INC., an Oklahoma Corporation whose address is 3705 W. MEMORIAL RD, STE 1410, OKLAHOMA CITY, Oklahoma 73134, the following described real estate in Lincoln County, New Mexico:

Lot 3, Block 5, HIDAWAY HILLS SUBDIVISION, Capitan, Lincoln County, New Mexico, as shown by the plat thereof filed in the office of the County Clerk and Ex-officio Recorder of Lincoln County, New Mexico, on June 7, 1971 in Tube No. 410, and being further shown by the ALTA/ACSM Land Title Survey filed in said records on October 20, 2009 in Cabinet J, Slide No. 420.

TOGETHER WITH all improvements thereon;

SUBJECT TO easements, restrictions, and reservations of record;

THIS DEED IS RECORDED TO CORRECT DEED FILED IN BOOK 2010, PAGE 2481

with warranty covenants.

Witness our hand(s) and seal(s) this day of May, 2010.

RACCOON INVESTMENTS, LLC A New Mexico Limited Liability Company

By: Kimble Kearns, President

STATE OF New Mu/w :ss.

This instrument was acknowledged before me this day of February, 2010 by KIMBLE KEARNS, President, for and on behalf of Raccoon Investments, LLC, a New Mexico Limited

Susie W. Berend

Commission Expires:

My commission expires:

8/13/2011

Store #	City	State	May	June	July	August	September	October	November	December	January	Febuary	March	April	YR Totals
6584	Ruidoso	NM.	850	1950	700	400	800	350	250	500	5700	16700	400	350	28950
4131	Tularosa	NM	1	1	0	0	0	0	1	1	1	0	1	0	6
2733	Alamogordo	NM	748	748	0	748	748	748	748	748	748	748	2244	0	8976
4435	Alamogordo	NM	748	748	0	748	748	0	0	1496	0	748	10473	5984	21693

BO 64l

AVG.
2412.5
0.5
748
1807.75
1242 1875

.



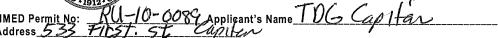
Revised 10/06 N/T - Not Tested

EX - Existing

STATE OF NEW MEXICO ENVIRONMENT DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

ONSITE LIQUID WASTE SYSTEM INSPECTION





Type	of Ins	pection: INITIAL IF FINAL REINSPECTION COMPLAINT OTHER	2		
	73 Y Y Y	I DING GENER		i/	
1.	BUL	LDING SEWER	c.	<u></u>	Correctly sized disposal area
a		Correct Size and Material 20.7.3.813.C	d.	<u> </u>	Correct Setbacks
b		Required Cleanouts Present, Installed Correctly & to Finish Grade 20.7.3.813.B	e.		Excavation at Correct Grade
c		Pipe at Correct Grade (1 /8" to 1/4" per foot) 20.7.3.813.A	f.		Correct Spacing Between Trenches or Beds
			g.		Smeared Soils Not Present on Trench or Bed
2.	PRE	-TREATMENT	ĥ.	-	Correct Aggregate; Type, Size, Clean and Amount
a.		Type:	i	1/	Correct Depth of Aggregate Above and Below Pipe
h _		Installed as per Plans or Manufacturer's Instructions 20.7.3.401.1	i.	<u> </u>	Correct Pipe; 2-hole, 4" Minimum Diameter, End Caps
0		Other:	- -	-	
U		Outor.	к.		Aggregate Covered with Approved Material
•	CED	TICELNIZ COC PEDE CONTACTOR VINIO	ı.		Pipe Covered with Geotextile Fabric in Place of Aggregate
		FIC TANK / SEC./TERT. TREATMENT UNIT	m.		Inspection Port(s), Capped
Ţ	ype	Concrete ☐ Plastic/Fiberglass ☐ Sec./Tert. Treatment Unit	n.		Other: EZ-FLOW
a		Cocated as per Site Plan 20.7.3.401.I			Seepage Pits:
b	V	Correct Setbacks 20.7.3.302, Table 302.1	a.		Underside of lid coated; riser provided as required
c	V	Tank Certified; Correctly Labeled 20.7.3.501; 20.7.3.501.B.4	b.		Domed covers covered with minimum 2" concrete
d.	L	Tank Correctly Oriented, Level & Depth Below Grade 20.7.3.501.J.7	c.		Brick or block laid end to end with staggered tight joints
e	U	Inlet / Outlet Pipes Sealed & Watertight	d.		Side wall inlet properly vented
f.	8	Inlet / Outlet Baffle or Tee with Branch Extending 12" Minimum Below Liquid Level	φ.		Inlet/outlet fittings sealed
σ	1	Effluent Filter Installed, Riser to Grade	٥.		motodist mange could
Б h	<u></u>	Tank & Fittings Correctly Vented	f.		Locking or secured lid
h		Concrete Tank: Coated & Material Correct OR Type V Concrete			Other Disposed Methods
1	<u>~</u>	,			Other Disposal Methods:
,l· _	-	Outlet Pipe Correct Size & Material	a.		Type:
k		Manholes Correctly Sized & Located	b.		Installed per Plans or Manufacturer's Instructions
l	_i	Manhole Risers at Grade, Diameter, Secure Lids & Coated, if concrete	c.		Other:
m		Tank Installed per Manufacturer's Instructions	7.		ON-SITE WELL MEASUREMENTS
n		Advanced Treatment Unit Installed per Manufacturer's Instructions	a.		Nitrate-N: (mg/L)
0.	1	Water Tightness Test Conducted	b.		Iron (mg/L)
p.		Water Softener Discharge Bypassing ATU	c.		Fluoride. (mg/L)
q.		Other:			
4.		SURGE, PUMP AND HOLDING TANKS	8.		GIS COORDINATES
Type		☐ Surge Tank ☐ Pump Tank ☐ Holding Tank ☐ Other			Well: latlong
a.		Correct Size			Elev
b		Inlet/Outlet Sealed Correctly			Sys: lat 33,54604 long 165,58755
c		Pump(s) & Alarms installed on separate circuits, properly set and located			1161 PM
d		Manholes, Risers, Lids Correct and Water Tight	9.		Elev_ <i>6440</i>
u			9.		
_	/	TEE /DIOTRIBUTION DON/HE A DED			COMMENTS/VIOLATIONS
5.	V	TEE/DISTRIBUTION BOX/HEADER			☐ Continued on attached Sheet(s)
a		4" Diameter			
b	/	Tee Level/Header			
c		"D" Box Level and on Concrete Slab or Stable Soil			
d	V,	"D" Box Inlet Baffled and 1" Above Outlets			
e		"D" Box Outlets at Same Height; Equal Flow to Outlets			Installation Approved
f.	1/	Tee or "D" Located a Min. of 5' From Disposal Field.			Installation Approved w/conditions (See
g. $^-$		Other:			Comments/Violations)
6.		DISPOSAL TRENCH OR BED			☐ Installation Not Approved (See
Type		Trench ☐ Chamber ☐ Bed ☐ Seepage Pit(s) ☐ Other			Comments/Violations)
a.	1/	Soil Type Verified Clay Loam.	10.		Final Approval
b	1	Correct Clearance to Ground Water or Limiting Layer	10.		Granted Not Granted
	ional		_	a	
Addit	lonai	comments:	1		11.11 11.75-12
			Mp	<u>et</u>	14M 10 10
				nspecto	
		I c	ertify/	that th	is liquid waste system was
		OK - If installed and meets Requirements ins	stalled	in acco	ordance with the permit
		N/I - Not inspected ap	prøyed	l by NN	MED, (m) ess otherwise noted
			C omm	ents S	ection above.
		N/C - Not Compliant	11-1	\sim	/h1xmm - 06-25
		N/V - Not Verified		/	
		A/P - As Proposed	staller	,	Date



State of New Mexico ENVIRONMENT DEPARTMENT

Field Operations Division

RUIDOSO Field Office 1216 E. MECHEM, SUITE 2 **RUIDOSO, NM 88345** Telephone: (505) 258-3272 Fax: (505) 258-4891



Ron Curry SECRETARY

Date Application Received:

06-22-10

LWP-RU-10-089

Owner Information:

TDG Capitan, Inc., an Oklahoma Corporation

3705 W. MEMORIAL RD. STE. 1410

OKLAHOMA CITY, OK 73134

533 FIRST ST, CAPITAN NM 88316

Subdivision: **HIDAWAY HILS**

> UNIT 000

Block: 005

Lot 003

Township:

Range:

Section:

Fee Calculation:

FEE AMOUNT

Permit Type =COMM. 150.00

Variance Requested: \$00.00

Reinspection Done: 00.00

Total Due: \$150.00

Payment Information:

Name On Check

MOUNTAIN TOP

Check Number 1864

Received By EKNIGHT

Amount Paid 150.00

MOUNTAIN TOP, INC.

110 PAT THOMPSON CT. RUIDOSO, NM 88345 WWW.MOUNTAINTOPRUIDOSO.COM (575) 258-9203

CITY BANK NEW MEXICO

1096 MECHEM DR., STE. 103 **RUIDOSO, NM 88345**

1864

95-686-1122

6/22/2010

PAY TO THE ORDER OF

NMED Liquid Waste Fund

\$ **150.00

One Hundred Fifty and 00/100*

NMED

MEMO

Family Dollar/Capitan

nanci Swann

"OO 1864" - 1: 1 1 2 2 0 6 8 6 0 1 8 0 2 1 7 2 6 3 1 1 1

"AS BUILT"

V. Site Plan: Sketch the lot. Show features such as the tank, the drainage field, any wells, property lines, residence and other structures, other septic systems. Be as accurate as possible. Show the distances between the (tank "treatment unit" and the drain field "disposal system") to the features listed on the form. These distances can be no closer to the system than listed in Table 302.1 minimum setbacks and clearances of the Liquid Waste Regulations.

Treatment Unit to:	Features		sal System to:	
(Tank) ft. ft. ft. ft. ft. ft. ft. ft	Property line Property line Buildings Structures Wells Irrigation Arroyos Surface water	100	r Field)ftftftftftftftff.	
	U.S. H 60' ET-F	Wy. 33	ft.	
	40° EZ-F]		N↑
	40'	D. Box TREAME		
		f AV	RKING	.39
Tank Depth:	Leachfield Depth:		PORE	
Permit #: <u>RV 10 -0089</u> Name on permit: <u>TDG</u> (DAPITAN,	Date: 06 - 2 Submitted by:		
Address: 533 157.	5-			
Subdivision:	Townshi	p Range	Section	
Affidavit of installation signature	Non Jun	<u></u>	Attached Photos	
I certify that the methods and material	s used for installation comp	bly with 20 NMAC 7	· .3	