State of New Mexico .

Energy, Minerals and Natural Resources Department

Form C-	_107-B_	
		, 200-

<u>District I</u> 1625 N. French Drive, Hobbs, NM 88240

<u>District II</u> 1301 W. Grand Ave, Artesia, NM 88210 · District III 1000 Rio Brazos Road, Aztec, NM 87410

<u>District IV</u> 1220 S. St Francis Dr, Santa Fe, NM

OIL CONSERVATION DIVISION

1220 S. St Francis Drive Santa Fe, New Mexico 87505

Submit the original application to the Santa Fe office with one copy to the appropriate District Office.

APPLICATION FOR SURFA	CE COMMINGI	LING (DIVERSE	OWNERSH	(P): 32 · 32		
OPERATOR NAME:		·	•			
OPERATOR ADDRESS:			•			
APPLICATION TYPE:		_		•		
☐ Pool Commingling ☐ Lease Comminglin	g Pool and Lease Co	mmingling Off-Lease	Storage and Measur	ement (Only if not Surface	e Commingled)	
LEASE TYPE: Fee	State		· .	<u> </u>		
Is this an Amendment to existing Order Have the Bureau of Land Management Yes No	? Yes No If (BLM) and State Land	"Yes", please include to doffice (SLO) been not	he appropriate C tified in writing	of the proposed comm	ningling	
(A) POOL COMMINGLING Please attach sheets with the following information						
(1) Pool Names and Codes	Gravities / BTU of Non-Commingled Production	Calculated Gravities / BTU of Commingled Production	Value of Non- Commingled - Production	Calculated Value of Commingled . Production	Volumes	
			<u>.</u>			
			:			
		_				
(2) Are any units producing at top allowab	·	· - · · ·				
(4) Measurement type:						
	(B) LEA	SE COMMINGLIN	G	· · · · · · · · · · · · · · · · · · ·	•	
	Please attach sheet	s with the following in	oformation		<u> </u>	
 Pool Name and Code. Is all production from same source of s Have all interest owners been notified b Measurement type: Metering 	y certified mail of the pro		⊡Yes □	No		
(C) POOL and LEASE COMMINGLING						
Please attach sheets with the following information (1) Complete Sections A and E.						
(1) Complete Decitors A and D.						
		ORAGE and MEA				
Please attached sheets with the following information						
(1) Is all production from same source of s (2) Include proof of notice to all interest o	, — —	o:	•	·		
(E) AI	DITIONAL INFO	RMATION (for all	application ty	/pes)		
	Please attach sheet	s with the following ir		- <i>'</i>		
 A schematic diagram of facility, included A plat with lease boundaries showing at Lease Names, Lease and Well Number 	ill well and facility locati	ions. Include lease numbe	ers if Federal or Sta	ate lands are involved.		
I hereby certify that the information above is	true and complete to the	best of my knowledge an	d belief.	-,-		
SIGNATURE:	ті	TLE:		DATE:		
TYPE OR PRINT NAME						
THE ORTHINI NAME						

OCD Exhibit 3