State of New Mexico

<u>District I</u> 1625 N. French Drive, Hobbs, NM 88240 Energy, Minerals and Natural Resources Department

Form C107-E	3
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<u>District II</u> 1301 W. Grand Ave, Artesia, NM 88210 <u>District III</u> 1000 Rio Brazos Road, Aztec. NM 87410

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.

<u>District IV</u> 1220 S. St Francis Dr, Santa Fe. NM 87505

TYPE OR PRINT NAME

87505					
APPLICATION FOR SURFA	CE COMMING	LING (DIVERSE	OWNERSH	IP)	
OPERATOR NAME:				····	
OPERATOR ADDRESS:			·		
APPLICATION TYPE:					
☐ Pool Commingling ☐ Lease Commingling	ng ☐Pool and Lease Co	mmingling	Storage and Measu	rement (Only if not Surface	e Commingled)
LEASE TYPE:	State	ral			
Is this an Amendment to existing Order					
Has the Comm. of Public Lands (BLM)				ommingling Yes	□No
		OL COMMINGLIN is with the following in			
(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
		1		-	
	<u> </u>	-	<u> </u>		
		-	-	-	<u> </u>
 Pool Name and Code. Is all production from same source of Has all interest owners been notified by 	Please attach sheet supply? Yes N certified mail of the proj			lo	
(4) Measurement type: Metering	Other				
		LEASE COMMIN			
(1) Complete Sections A and E.					
(I	,	ORAGE and MEA			
(1) Is all production from some source of		ets with the following	intormation		
 Is all production from same source of source. Include proof of notice to all interest of source. 	• • •			·	
(E) AI		RMATION (for all s with the following in		ypes)	
(1) A schematic diagram of facility, include		vare avere iring it			
(2) A plat with lease boundaries showing a(3) Lease Names, Lease and Well Number	all well and facility locati	ons. 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:	•	TLE:		DATE:	

TELEPHONE NO.:_____