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e-mail Address

TYPE WFX APP NO 22 8350375

ABOVE THIS LINE FOR DIVISION USE ONLY

## NEW MEXICO OIL CONVERVATION DIVISION

- Engineering Bureau -1220 South St. Francis Drive, Santa Fe, NM 87505

		ADMINISTRATIVE APPLICA	TION COV	ERSHE	<u> ET</u>	
	THIS COVE	RSHEET IS MANDATORY FOR ALL ADMINISTRATIVE APPLICATION WHICH REQUIRE PROCESSING AT THE DI			AND REGULATIONS	
Applicat	tion Acronym	s:				
• •	_	and <mark>ard Location]  [NSL-Non-Standard P</mark> i	oration Unit1	SD-Simulta	meous Dedica	ation]
	[DHC-Dow	nhole Commingling] [CTB-Lease Comnool Commingling] [OLS-Off-Lease Stor	ningling] [PLC	Pool/Leas	e Comminglir	
		[WFX-Waterflood Expansion] [PMX-Pre		•	-	
		[SWD-Salt Water Disposal] [IPI-Inj				_
	[EOR-Qua	lified Enhanced Oil Recovery Certification	onj [PPR-Posu	ive Produc	tion Respons	ie]
[1]	TVPF OF	APPLICATION - Check Those Which	Annly for [Al		A A	•
[1]			112 63	1		*Brander
	[A]	Location - Spacing Unit - Simultaneous I  ☐ NSL ☐ NSP ☐ SD	Jedication	OGT	9. 20u.	
	Chec	ek One Only for [B] or [C]	,		and the second s	
	[B]	Commingling - Storage - Measurement		•	and the gradient of the second	a.
	[-]	☐ DHC ☐ CTB ☐ PLC ☐ PC	OLS	OLM		
	[C]	Injection - Disposal - Pressure Increase -  WFX PMX SWD IPI	Enhanced Oil <b>Ro</b>	_		
[2]	NOTIFIC	ATION REQUIRED TO: - Check The	* *	ly, or	Does Not A	Apply
	[A]	Working, Royalty or Overriding Royal	y Interest Owners			
	[B]	Offset Operators, Leaseholders or Surface Owner				
	[C]	Application if One Which Requires Published Legal Notice				
	[D]	Notification and/or Concurrent Approval by BLM or SLO U.S. Bureau of Land Management - Commissioner of Public Lands, State Land Office				
	[E]	For all of the above, Proof of Notification or Publication is Attached, and/or,				
	[F]	☐ Waivers are Attached				
[3]	INFORM	ATION / DATA SUBMITTED IS CO	MPLETE - Ce	rtification		
		that I, or personnel under my supervision, have				ns of the
		on Division. Further, I assert that the attached a				
		he best of my knowledge and where applicable.				
		id that any omission of data (including API ni	_			
	and any r	equired notification is cause to have the applic	ation package ret	urned with i	no action taken.	•
	<b>N</b>	lote: Statement must be completed by an individual w	ith managerial and/c	r supervisory	capacity.	
Doug O'N	Jeil	(Fax	Γ.,	ningarina M	anagar	10/7/2002
	Type Name	Signature	Tit	gineering M le	anagei	10/7/2002 Date
	AT. 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1	~-9	111	••		Date
			Do	ua ONeil@	Anachecorn c	ΛM