



**Aubrey Dunn, Commissioner of Public Lands  
State of New Mexico**

**WELL PAD APPLICATION CHECKLIST**

When submitting your application for a **well pad** please use the following list to ensure you have included all necessary documentation with your application packet. Incomplete applications will not be processed.

- Application Form – completed, signed and notarized.
- Metes and Bounds Survey – refer to survey criteria, labeled **Exhibit A**.
- Copy of Access Survey (*optional*), labeled **Exhibit B**.
- Contacted NMSLO Commercial Resources Division to determine what forms will be required to obtain consent or partial relinquishment from existing surface lessee(s). Once obtained, submit signed form, labeled **Exhibit C**.
- List of Equipment and Improvements (*if extra space needed*), labeled **Exhibit D-1**.
- Site Plan – showing placement of improvements, labeled **Exhibit D-2**.
- A.R.M.S. Survey or Cultural Survey, labeled **Confidential Exhibit E**.
- T&E Reports (*if required*), labeled **Confidential Exhibit F**.
- Copy of the Environmental Assessment (*if conducted by BLM or otherwise required by an outside agency*), labeled **Exhibit G**.
- Copy of oil and gas lease or serial register page, labeled **Exhibit H**.
- Copy of NMOCD Forms (i.e. C-102 etc., if applicable), labeled **Exhibit I**.
- Close-out and Surface Reclamation Plan, labeled **Exhibit J**.
- \$500 Application Fee.\*

If you have any questions regarding the application procedure please contact the Commercial Resources Division at (505) 827-5724.

\* Please make checks payable to “*Commissioner of Public Lands*”. When you provide a check as payment, you authorize the State of New Mexico to either use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction.



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State of New Mexico**

**APPLICATION FOR WELL PAD BUSINESS LEASE**

To: Commissioner of Public Lands  
Attn: Commercial Resources Division  
P.O. Box 1148, Santa Fe, New Mexico 87504  
310 Old Santa Fe Trail, Santa Fe, New Mexico 87501

Date: \_\_\_\_\_

Lease No. \_\_\_\_\_  
(assigned by NMSLO)

I, \_\_\_\_\_, (Name of the legal entity, or if applying as an individual, the personal name)  
a citizen over the age of twenty-one years (or a corporation authorized to do business in New Mexico) do hereby  
make application for a well pad business lease upon the following described lands, or such portion thereof as may  
be available for leasing, situated in the County of \_\_\_\_\_, State of New Mexico. I submit herewith a  
\$500.00 non-refundable application processing fee upon the following described lands:

**Description of Land in Aliquot Parts (See Survey Criteria)**

<u>SUBDIVISION</u>	<u>SECTION</u>	<u>TOWNSHIP</u>	<u>RANGE</u>	<u>ACRES</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Do you have an existing business lease at this location which you wish to renew at this time for the same permitted  
use?  Yes  No

If yes, please indicate the existing business lease number at the top of this page.

Please explain why you are applying for this lease to place a well pad on state trust lands (i.e. If restricted from  
surface access by the Bureau of Land Management (BLM) explain the nature of the restriction.):

Applicant project name and/or number (optional):

## 1. LEASE TERM REQUESTED

Please check the box below if you are requesting a 5 year “non-bid” lease or if you are requesting a long term “bid lease.”

5 year lease

Long term “bid lease”\* – 10 years and for so long as held by production

A “**bid lease**” means a business lease entered into by the commissioner after the public advertisement and public auction required by the Enabling Act.

## 2. SURFACE INFORMATION

### A. REQUIRED SURFACE SURVEY

Attach a metes and bounds surface survey following the guidelines in the Standard Criteria for Surface Surveys including adherence to *Minimum Standards for Surveying in New Mexico* for property boundary surveying, NMAC 12.8.2.9., and a site plan detailing proposed locations for all potential surface usage. Label this section **Attachment A**. Please refer to the instructions on the “Standard Criteria for Surface Surveys” for additional information regarding this requirement.

### B. SITE ACCESS

1) Attach a center-line survey indicating ingress and egress from the nearest public road to/from the well pad, labeled **Attachment B**.

2) Describe the proposed access to the site? (*As shown in Attachment B.*)

3) Will access require you to cross private lands?  Yes  No

### C. EXISTING LEASES

1) Is there an existing grazing or other surface lease on this trust land?

Yes  No

If yes, you will be required to furnish a “*Partial Relinquishment*” removing the requested acreage from the grazing lease for use in this business lease, labeled **Attachment C**. *Please contact the Commercial Division to ensure you have the correct lessee information and all required forms for processing the relinquishment before submitting it for the lessee’s signature.*

### D. IMPROVEMENTS

1) List type and description of any *existing* improvements on the land:

2) List the type and description of the improvements you intend to place on the land and the approximate value of the same. If more room is required you may attach a list of improvements, labeled **Attachment D**. Include the proposed location of the improvements on the site plan submitted with Attachment A.

3) Estimated date of completion for proposed improvements: \_\_\_\_\_

4) Will you be using a closed-loop system?  Yes  No

#### E. ARCHAEOLOGICAL SURVEY

Applicant/Lessee shall be solely liable for compliance with the Cultural Properties Act, The Cultural Properties Protection Act, and the Prehistoric and Historic Sites Preservation Act, NMSA 18-6 and 16 USC 416 to 467. NMSLO requires the applicant to provide the basic NMCRIS Investigation Abstract and Cultural Resource Findings Report as well as any information obtained through additional survey(s) or other required compliance actions to the Trust Land Archaeologist.

1) Have you completed any required surveys of the acreage to be impacted by this oil and gas development in accord with these laws?  Yes  No

If yes, please forward the report and all associated materials to:

Attn: Trust Land Archaeologist  
New Mexico State Land Office  
P.O. Box 1148  
Santa Fe, NM 87504-1148

If no, when do you plan to complete the survey(s)? \_\_\_\_\_

*Please provide a letter, labeled **Attachment E**, with your application indicating that this survey has been conducted and the report delivered to the Trust Land Archaeologist or the date the survey will be conducted.*

#### F. ENVIRONMENTAL ASSESSMENT (EA)

*If an EA was prepared by the BLM for the APD application, please attach a copy of the EA labeled **Attachment F**. If no such document has been prepared you are not required to prepare an EA for NMSLO unless specifically requested to do so in writing. Applicant/Lessee shall be solely responsible for compliance with the Threatened and Endangered Species Act, 16 USC 1531.*

### 3. SUBSURFACE AND WELL INFORMATION

#### A. SUBSURFACE LEASE

1) Provide the name of the entity from which you obtained your lease for the subsurface estate. (Unless this is fee land owned by the applicant or other confidential party.)

\_\_\_\_\_

2) Provide a copy of the companion oil and gas lease giving Applicant access to the targeted resources; label it **Attachment G**. (This requirement may be satisfied by including a copy of the serial register page or the first page of the lease showing the lease number.)

3) Is the pad located in the Department of Interior Designated Potash Area?

Yes  No

4) Is there an existing oil, gas or mineral lease on this trust land?

Yes  No

If yes, furnish a "Request to Lease Land Currently Leased" or letter signed by the existing oil, gas or mineral lessee verifying there is no conflict with their operations.

**B. WELL INFORMATION**

1) How many wells do you initially plan to drill from this pad? \_\_\_\_\_

2) Attach a copy of your Oil Conservation Division Form C-102 for each proposed well, labeled **Attachment H**.

3) Following each completion you will be required to submit a copy of OCD Form C-105 as well as a copy of the Hydraulic Fracturing Fluid Disclosure Form. If the same fluids will be used for each completion you only need to submit this form once.

**C. OGRID NUMBER**

1) Please list your OGRID number if you already have one.

OGRID: \_\_\_\_\_

**4. CLOSE-OUT PLAN**

A. Please attach a copy of your proposed “Close-out Plan” and Surface Reclamation Plan labeled **Attachment H**. (*The “Close-out Plan” should be the same plan submitted to the Oil Conservation Division. The Surface Reclamation Plan should address the reclamation of the subject NMSLO surface area.*)

**5. CONTACT INFORMATION**

Please complete the contact information below and notify NMSLO Commercial Resources Division if any of this information changes.

**Required Applicant Contact Information**

Applicant Contact: \_\_\_\_\_

Applicant Phone #: \_\_\_\_\_

Applicant Email: \_\_\_\_\_

**Required Field Contact Information**

Field Contact: \_\_\_\_\_

Field Phone #: \_\_\_\_\_

Field Email: \_\_\_\_\_

If you are providing application documents electronically through an ftp site please include the access information: (*optional*)

FTP address: \_\_\_\_\_

Username: \_\_\_\_\_

Password: \_\_\_\_\_

***Affirmation on the following page.***

6. **Cultural Resource Protection:**

Please indicate that you (Applicant) have read the **T&E and Cultural Resources Notice to Applicants** and that you understand and agree to abide by the terms and conditions set forth therein. Yes \_\_\_\_\_ No \_\_\_\_\_

An Archaeological Survey is strongly recommended. If no survey is provided an Archaeological Records Management Section Inspection (ARMS Inspection) in accordance with NMAC 4.10.15.9 is required. If the ARMS Inspection is not provided by the applicant, the Land Office will provide the ARMS Inspection in the order applications are received.

An Archaeological Survey is attached with a cover page labeled:  
Confidential Exhibit \_\_\_\_\_.  
Yes \_\_\_\_\_ No \_\_\_\_\_

An ARMS Inspection is attached with a cover page labeled:  
Confidential Exhibit \_\_\_\_\_.  
Yes \_\_\_\_\_ No \_\_\_\_\_

The Applicant would like the NMSLO to provide the ARMS Inspection:  
Yes \_\_\_\_\_ No \_\_\_\_\_

7. **Shape Files:**

Shape Files are required with all applications.

Shape Files for this project are available: Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, the NMSLO lease analyst will contact you at the address you provide:

Applicant Shape File Custodian (email contact information): \_\_\_\_\_

I, \_\_\_\_\_, the above applicant or attorney in fact /  
*(print name of applicant or of attorney in fact / authorized agent signing below)*  
authorized agent of above named corporation, do solemnly swear, or affirm, that each and every statement made in this application is true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
*Signature of Applicant*

\_\_\_\_\_  
*State of Parent Corporation & Incorporation No.*

\_\_\_\_\_  
*Address, City, State and Zip Code*

STATE OF \_\_\_\_\_ )

)ss.

COUNTY OF \_\_\_\_\_ )

Subscribed and sworn to, or affirmed, before me by \_\_\_\_\_, \_\_\_\_\_  
*Name Title*

of \_\_\_\_\_ Corporation, on behalf of said applicant, this  
*(Company/Corporation)*

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ AD.

**SEAL**

Notary Public: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

**\$500.00 NON-REFUNDABLE APPLICATION FEE\***

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