

**New Mexico State Land Office**  
**Shut-in Oil Well Notification Form**

**(19-10-6 NMSA, 19.2.100.71 NMAC)**

Oil and Gas Lease Number \_\_\_\_\_ Assignment Number \_\_\_\_\_

Is this lease in compliance with State Land  
Office and other state agency regulations?      Yes      No

SLO bond posted      Yes      No

Communitized Well      Yes      No

Unitized Well      Yes      No

If well is part of a federal unit, Please also contact James Glover at the Bureau of Land  
Management

Communitization/Unitization Agreement Name \_\_\_\_\_

API # \_\_\_\_\_  
(A separate payment and notification form must be submitted for each oil well shut in)

Well Name \_\_\_\_\_ Well # \_\_\_\_\_

Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_ Unit/Lot \_\_\_\_\_

Is the well capable of producing oil?      ☐ Yes      ☐ No

Shut-in Well Date \_\_\_\_\_

Shut-in payment amount due \_\_\_\_\_  
(Payment shall be twice the annual lease rental but not less than \$320.00 per well, per year. 19-10-6 NMSA)

Shut-in payment date received (NMSLO use only) \_\_\_\_\_

Representative of \_\_\_\_\_

Representative Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number \_\_\_\_\_

Fax Number \_\_\_\_\_

Email Address \_\_\_\_\_

**CERTIFICATION: I hereby certify that the information submitted within this notification is accurate and complete to the best of my knowledge. I understand that no action will be taken to perpetuate the associated Oil and Gas Lease unless and until the required Shut-in Payment is remitted and paid in full to the New Mexico State Land Office in a timely manner. Please be advised that payments will be drafted from the remitter's account immediately upon receipt.**

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

**Note: A C103 filed with NMOCD or another document issued by NMOCD approving the shut-in status of the well must be enclosed with the submittal of this form to NMSLO.**