



**Stephanie Garcia Richard, Commissioner of Public Lands  
State of New Mexico**

**APPLICATION FOR RIGHT-OF-WAY EASEMENT**

Dear Commissioner:

\_\_\_\_\_  
(Name of Applicant)

\_\_\_\_\_  
(Designated Field Contact Name)

\_\_\_\_\_  
(Street Address, City, State, Zip Code)

\_\_\_\_\_  
(Field Contact Phone Number)

\_\_\_\_\_  
(Contact Name, Phone Number)

\_\_\_\_\_  
(Field Contact Email Address)

hereby applies for a right-of-way easement for the construction and location of a \_\_\_\_\_

**(Provide detailed information regarding the type of line; electrical, telecommunications, pipeline, road or facility. Provide O.D. for pipelines)**

If a pipeline is applied for, please check the following: ☐ Buried ☐ Surface ☐ P.S.I. ☐ Produced Water

Project Name: \_\_\_\_\_

It is requested that the right-of-way be \_\_\_\_\_ (*must correspond with survey plat*) feet wide as indicated on the attached two copies of survey maps or plats shown in red the survey centerline and length of the right-of-way measured in rods. The legal description of the proposed right-of-way is described in aliquot 40-acre tracts (qtr. /qtr. breakdown) with a description of rods and acres shown in each aliquot part and a total of rods and acres included in the proposed right-of-way. Permission to survey is included with this application. The survey was completed within twelve months of this application, and the proposed right-of-way has been staked and flagged. *Failure to do so will result in an additional application fee.*

It is requested that the right-of-way be for a term of \_\_\_\_\_ years. (*Term may not exceed 35 years.*)

In accordance with 19.2.10.18, one of the following is enclosed to cover payment for damages that might occur to the state land improvements of a surface lessee: (*A bond may be in the form of a Surety Bond or a Letter of Credit.*)

- ☐ Single bond in the amount of \$500.00
- ☐ Right-of-way blanket bond in the amount of \$2,500.00
- ☐ Blanket right-of-way bond of \$2,500.00 is currently on file with the State Land Office
- ☐ A Mega bond, number \_\_\_\_\_
- ☐ A Reclamation Bond, no. \_\_\_\_\_ for \$\_\_\_\_\_ is currently on file with the State Land Office
- ☐ A waiver of property damage bond by the surface lessee is enclosed.
- ☐ Applicant requests that the bond amount for damages to the trust lands be reduced or waived by the Commissioner.

**Cultural Resource Protection:**

Parties are expected to review and abide by the laws and rules related to the protection of cultural properties, including the Cultural Properties Protection Rule (19.2.24 NMAC). Please indicate whether you have signed the enclosed Acknowledgment Form.

Yes \_\_\_\_\_ No \_\_\_\_\_

The NMSLO Cultural Resources Cover Sheet (Exhibit \_\_\_\_\_) provided to you by the archaeological consultant is attached to your application and indicates whether:

an ARMS Inspection          or an Archaeological Survey          has been conducted for this project.

(see 19.2.24.9 & 19.2.24.10 NMAC for exceptions of certain categories of activity that do not require an ARMS inspection or survey).

Does your project involve federal or other state agencies?          Yes \_\_\_\_\_ No \_\_\_\_\_

In addition to complying with the requirements of the Cultural Properties Protection Rule, parties also must comply with all other applicable state and federal laws and rules, including laws and rules pertaining to endangered and threatened species and habitat protection.

**Digital Files:**

Digital information of your project's location is required. Acceptable formats: shapefiles (preferred), gps coordinates, kml/kmz files or georeferenced AutoCAD files.          Yes \_\_\_\_\_ No \_\_\_\_\_

Digital Files Custodian-Name if other than the applicant: \_\_\_\_\_

Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Pursuant to New Mexico State Land Office fee schedule, enclosed is a check in the amount of \$\_\_\_\_\_ for \_\_\_\_\_ rods (16.5 feet) at \_\_\_\_\_ per rod, plus **\$250.00** application fee.

*\* 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.*

Applicant \_\_\_\_\_

By: \_\_\_\_\_  
Attorney in Fact or Authorized Agent

Title: \_\_\_\_\_

Agents name and address:  
(*Letter of Authorization attached*)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone number \_\_\_\_\_

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

## ACKNOWLEDGMENT FOR CORPORATIONS

STATE OF )  
 ) ss.  
COUNTY OF )

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_, \_\_\_\_\_  
*(Name of Officer)* *(Title of Officer)*

of \_\_\_\_\_, a \_\_\_\_\_  
*(Name of Corporation Acknowledging)* *(State of Incorporation)*

corporation, on behalf of said corporation.

My Commission Expires:

\_\_\_\_\_  
NOTARY PUBLIC

## ACKNOWLEDGMENT FOR NATURAL PERSONS

STATE OF \_\_\_\_\_ )  
 )ss.  
COUNTY OF \_\_\_\_\_ )

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_ 20\_\_\_\_, by \_\_\_\_\_, \_\_\_\_\_

My Commission Expires:

\_\_\_\_\_  
NOTARY PUBLIC