

State of New Mexico
Energy, Minerals and Natural Resources Department
Oil Conservation Division
(File with Oil Conservation Division, 1220 S. St. Francis Dr., Santa Fe, New Mexico 87505)

Surety Bond for Recycling Facility/Containment ("Bond")

KNOW ALL MEN BY THESE PRESENTS:

Name of Operator ("Operator"):

Operator's Address:

State in which Operator is Organized:

Operator's OGRID Number:

Name of Surety Company ("Surety"):

Surety Company's Business Address:

Bond Number:

Effective Date:

Required Financial Assurance ("Financial Assurance"):

WHEREAS, Operator, authorized to do business in the State of New Mexico, and Surety, authorized by the Superintendent of Insurance to do business in the State of New Mexico, pursuant to NMSA 1978, Section 70-2-12, as may be amended from time to time, are, jointly and severally, firmly bound to the State of New Mexico's Energy, Minerals and Natural Resources Department ("Department"), or its successor, for payment of the amount of the Financial Assurance indicated above.

WHEREAS, Operator has or may enter into the collection, treatment, storage, recycling, or re-use of produced water in Section____, Township _____, Range_____, NMPM, _____ County, New Mexico ("Facility").

WHEREAS, Surety has been advised that Operator has requested this Bond as security for Operator's compliance with all laws, rules, and orders, as they exist now or may exist in the future, applicable to such activities, including, but not limited to, proper operation, closing and remediation of the Facility (collectively, the "Obligations").

THEN AND IN THAT EVENT, this obligation shall be null and void; otherwise, and in default of complete compliance with any and all of said Obligations, this Bond shall remain in full force and effect.

OPERATOR

By: _____
Signature

Title

SURETY

By: _____
Signature*

Title

*Include Power of Attorney or other instrument authorizing signature

APPROVED BY:

Oil Conservation Division of New Mexico

By _____

Date _____

INDIVIDUAL ACKNOWLEDGMENT: (If dba, must read – Example: John Doe dba ABC Services)

State of New Mexico
County of _____

This instrument was acknowledged before me on this _____ day of _____ 20_____,
by _____
(Individual Operator)

Notary Public

SEAL

My Commission Expires:

ACKNOWLEDGMENT FOR CORPORATION, PARTNERSHIP OR LIMITED LIABILITY COMPANY

State of New Mexico
County of _____

This instrument was acknowledged before me on this _____ day of _____,
20_____,
by _____ of _____
(Name of Person Signing Document) (Title)

(Name of Operator)

Notary Public

SEAL

My Commission Expires:
