

Submit within 45 days of well completion	State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505	Revised April 3, 2017					
		1. WELL API NO.					
		2. Well Name:					
					3. Well Number:		
HYDRAULIC FRACTURING FLUID DISCLOSURE			4. Surface Hole Location:				
			Unit:	Lot:	Section:	Township:	Range:
			Feet from:		N/S Line:		
			Feet from:		E/W Line:		
			5. Bottom Hole Location :				
Unit:		Lot:	Section:	Township:	Range:		
Feet from:		N/S Line:					
Feet from:		E/W Line:					
6. Latitude:		Longitude:					
NAD83							
7. County:							
8. Operator Name and Address:			9. OGRID:		10. Phone Number:		
11. Fracture Date(s):			Frac performed by:		12. Production Type:		
13. Pool Code(s):			14. Gross Fractured Interval:				
15. True Vertical Depth (TVD):			16. Total Volume of Fluid Pumped:				
17. HYDRAULIC FLUID COMPOSITION AND CONCENTRATION:							
Trade Name	Supplier	Purpose	Ingredients	(CAS #) Chemical Abstract Service #	Maximum Ingredient Concentration in Additive (% by mass)	Maximum Ingredient Concentration in HF Fluid (% by mass)	
18. I, as Operator, hereby certify that the information shown on this disclosure form is true and complete to the best of my knowledge and belief.							
Signature: _____		Printed Name: _____		Title: _____			
Date: _____							
E-mail Address: _____							

NMOCD does not require the reporting of information beyond MSDS data as described in 29 CFR 1910.1200. NMOCD does not require the reporting or disclosure of proprietary, trade secret or confidential business information.