Santa Fe Main Office
Phone: (505) 476-3441
General Information
Phone: (505) 629-6116

Online Phone Directory
Visit: https://www.emnrd.nm.gov/ocd/contact-us/

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-106
Revised August 1, 2011

ACT Permit No.
_____

NOTICE OF INTENTION TO UTILIZE AUTOMATIC CUSTODY TRANSFER EQUIPMENT

Operator_____

Address_____County_____

Lease(s) to be served by this ACT Unit_____

Pool(s) to be served by this ACT Unit_____

Location of ACT System: Unit_____Section_____Township_____Range_____
Order No. authorizing commingling between leases if more than one lease is to be served by this system.

_____Date_____
Order No. authorizing commingling between pools if more than one pool is to be served by this system

_____Date_____

Authorized transporter of oil from this system_____

Transporter's address_____

Maximum expected daily through-put for this system:_____
If system fails to transfer oil due to malfunction or otherwise, waste by overflow will be averted by:
CHECK ONE: A. ☐ Automatic shut-down facilities   B. ☐ Providing adequate available capacity to receive production
              as required by 19.15.18.15.C(8) NMAC   during maximum unattended time of lease operation
                                                            19.15.18.15.C(9) NMAC
If "A" above is checked, will flowing wells be shut-in at the header manifold or at the wellhead?

_____Maximum well-head shut-in pressure_____

If "B" above is checked, how much storage capacity is available above the normal high working level of the

surge tank _____BBLS.
What is the normal maximum unattended time of lease operation? _____Hours.
What device will be used for measuring oil in this ACT unit?
CHECK ONE: ☐   Positive displacement meter   ☐   Weir-type measuring vessel

             ☐   Positive volume metering chamber   ☐   Other; describe_____

Remarks:_____

OPERATOR:	OIL CONSERVATION DIVISION
I hereby certify the above information is true and complete to best of my knowledge and subject ACT system will be installed and operated in accordance with Rule 19.15.18.15 NMAC. Approval of this Form C-106 does not eliminate necessity of an approved C-104 prior to running any oil or gas from this system.	
Signature _____	Approved by:_____
Printed Name & Title_____	Title:_____
E-mail Address _____	Date:_____
Date _____ Telephone _____	

INSTRUCTIONS: Submit one copy of Form C-106 with the following attachments to appropriate district office.
1) Lease plat showing all wells which will be produced in ACT system.
2) Schematic diagram of battery and ACT equipment showing all major components and means employed to prove accuracy of measuring device.
3) Letter from transporter agreeing to utilization of ACT system as shown on schematic diagram.