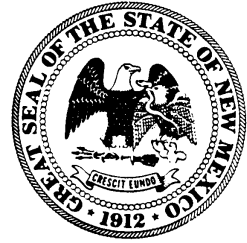




DOCUMENTATION OF CONTINUING EDUCATION HOURS



.....

I. INTRODUCTION:

This form shall be used to document continuing education hours completed in support of renewal for a well driller license or drill rig supervisor registration.

II. GENERAL:

Name: _____ License/Registration Number: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Email: _____

III. CONTINUING EDUCATION ACTIVITIES:

The following continuing education activities were completed during my current registration or license period:

Date	Class Title	Subject	Credit Hours

Along with the coursework listed above, the following activities I participated in were also approved by the Office of the State Engineer for continuing education credits:

Description of Activity: _____

Date (or time period): _____ Hours Approved: _____

Description of Activity: _____

Date (or time period): _____ Hours Approved: _____

IV. ADDITIONAL INFORMATION: List additional information below that is necessary to support your documentation of continuing education hours:

V. AFFIDAVIT:

I, _____, being first duly sworn, upon my oath, depose and say that I have carefully read the foregoing statement and attachments, which are a part hereof; and that each and all of the statements in the statement and attachments are true to the best of my knowledge and belief.

Signature of Well Driller or Drill Rig Supervisor

State of New Mexico
County of _____

This instrument was acknowledged before me this _____ day of _____, 20____

Signature of Notarial Officer

My Commission Expires _____