



Please submit Drivers License and Social Security Card with this Interest Form: If form is incomplete you will not be considered for a position.

Position interested in: _____ Date: _____

Are you able to travel and work out of town: Yes _____ No _____

PERSONAL INFORMATION

Name: _____ Referred by: _____

Address: _____ City/State: _____

Primary Phone #: _____ Cell /Alt # _____

Soc. Sec. # _____ Alien # _____ Expiration _____

EXPERIENCE INFORMATION

Drilling Rigs:

Driller: Yes _____ No _____ How Long? _____
 Derrickman: Yes _____ No _____ How Long? _____
 Motorman: Yes _____ No _____ How Long? _____
 Floors: Yes _____ No _____ How Long? _____

Daylight Rigs / Well Servicing:

Operator: Yes _____ No _____ How Long? _____
 Derrickman: Yes _____ No _____ How Long? _____
 Motor Hand: Yes _____ No _____ How Long? _____
 Floorhand: Yes _____ No _____ How Long? _____

As an employee of the Aztec Well Family you will be expected to perform the following Physical Demands as a minimum.

Circle YES OR NO If You Are or Are Not Capable Of These Demands.

- Low Level Lifting: 70 – 100 lbs. YES NO
- Side Carrying: Up to 50 lbs. YES NO 60 - 70 LBS frequently YES NO
- Push Force: 100 lbs. (Rare) YES NO, UP TO 50 lbs Intermittent YES NO, 75 lbs Frequent YES NO
- Waist to Waist Lifting: 50-100 lbs Intermittent YES NO, 50 lbs. Frequently YES NO
- Overhead Lifting: Up to 30 lbs Intermittent YES NO,
- Pulling: 50-75 lbs. Occasionally YES NO
- Front Carrying: 100 lbs. Occasional YES NO, Up to 50 lbs. Frequently YES NO
- Gripping Power: Frequently YES NO, Light Continuous YES NO

Office Use Only: Eligible for Rehire _____ Not Eligible for Rehire _____
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Thank you for applying for a position as a Team Member at
the Aztec Well Family



Applicant's Data Record

Last Name _____ First Name _____ Middle Name _____

Position(s) Interested in _____ City _____ Social Security Number _____

SEX Female Male

APPLICANT SOURCE OF RECRUITMENT (check one)

- | | |
|--|--|
| <input type="checkbox"/> Newspaper Advertising | <input type="checkbox"/> Private Employment Agency |
| <input type="checkbox"/> Friend | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Relative | <input type="checkbox"/> Internal: _____ |
| <input type="checkbox"/> Employee Referral | <input type="checkbox"/> Website: _____ |

RACE/NATIONAL ORIGIN (check one)

- American Indian or Alaskan Native – Origins in any of the original peoples of North America, Central America, or South America
- Asian – Origins in any of the peoples of the Far East, Southeast Asia, or the Indian Subcontinent
- Black or African American – A person having origins in any of the Black racial groups of Africa
- Hispanic or Latino (Other than White race) –A person a race other than White and of Mexican, Puerto Rican, Cuban, Central America, South America or other Spanish culture.
- Native Hawaiian or Other Pacific Islander – Origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands
- White – Origins in any of the original peoples of Europe, North Africa, or Middle East
- Two or more races

VETERANS/U.S. MILITARY STATUS

- | | |
|---|--|
| <input type="checkbox"/> Non-Veteran | <input type="checkbox"/> Armed Forces Service Metal Veterans |
| <input type="checkbox"/> Disabled Veteran | <input type="checkbox"/> Recently Separated Veteran (within three years of separation) |
| <input type="checkbox"/> Other Veteran | |

ACTIVE NATIONAL GUARD OR RESERVIST: Yes No

DISABILITY STATUS:

- No Disability
- Disability
- Accommodation Requested (Please attach statement)

Aztec Well Family and its affiliates provide equal employment opportunities (EEO) to all qualified employees and applicants for employment without regard to race, color, creed, religion, national origin, age, sex, disability, or veteran status in accordance with applicable federal, state and local laws. To further the principle of equal employment opportunity for all, the Company has developed affirmative action plans for minorities and women, the disabled, Vietnam-era veterans and all other eligible veterans. Your assistance in voluntarily answering the questions above will provide the information needed for us to comply with federal recordkeeping and reporting requirements. This information will only be used for the purpose of affirmative action and will be kept in a confidential file.

Signature of Applicant _____ Date _____

**Thank you for applying for a position as a Team Member at
the Aztec Well Family**

Phone 505.334.6191
Fax 505-334-7235



PO Box 100 Aztec
NM 87410

Universal Records Release Form

I _____ authorize that Aztec Well Family and its agencies may access my background & criminal record, previous employment, previous drug and alcohol test results and driving record for employment purposes.

Applicant's Signature

Date

Print Name

Social Security Number

____/____/_____
DOB

DL#

State of License