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	GAS
PRORATION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO
CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

FORM C-110
(Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <i>Continental Oil Company</i>	Lease <i>Lockhart B-14 A</i>	Well No. <i>1</i>
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Unit Letter <i>H</i>	Section <i>21S</i>	Township <i>37E</i>	Range <i>37E</i>	County <i>Lea</i>
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Pool <i>Shell Pipeline</i>	Kind of Lease (State, Fed, Fee) <i>Lease</i>
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If well produces oil or condensate give location of tanks	Unit Letter <i>H</i>	Section <i>21S</i>	Township <i>37E</i>	Range <i>37-E</i>
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Authorized transporter of oil <input type="checkbox"/> or condensate <input type="checkbox"/> <i>Shell Pipe Line Company</i>	Address (give address to which approved copy of this form is to be sent) <i>Box 1910, Midland, Texas</i>
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Is Gas Actually Connected? Yes No

Authorized transporter of casing head gas <input checked="" type="checkbox"/> or dry gas <input type="checkbox"/> <i>Skelly Oil Company</i>	Date Connected	Address (give address to which approved copy of this form is to be sent) <i>Box 1035, Sandoz, New Mexico</i>
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If gas is not being sold, give reasons and also explain its present disposition:

REASON(S) FOR FILING (please check proper box)

New Well <input type="checkbox"/>	Change in Ownership <input type="checkbox"/>
Change in Transporter (check one)	Other (explain below)
Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	<i>Change in Designation</i>
Casing head gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

Remarks
 This well formerly designated: *A. M. Lockhart B-14 A No. 1-D*
G/A IMOCO WAS 30 PIA

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.
 Executed this the *29th* day of *September*, 19 *63*

OIL CONSERVATION COMMISSION	By
Approved by <i>[Signature]</i>	Title District Superintendent
Title	Company
Date	Address