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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
PRODUCTION 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)
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FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <i>Continental Oil Company</i>			Lease <i>Federal 30</i>	Well No. <i>1</i>
Unit Letter <i>0</i>	Section <i>20</i>	Township <i>15</i>	Range <i>10</i>	County <i>Lin</i>

Pool <i>Subsidiary to Lease</i>	Kind of Lease (State, Fed, Fee) <i>Federal</i>			
If well produces oil or condensate give location of tanks	Unit Letter	Section <i>20</i>	Township <i>15</i>	Range <i>10</i>

Authorized transporter of oil <input type="checkbox"/> or condensate <input type="checkbox"/>	Address (give address to which approved copy of this form is to be sent) <i>Baytown, Texas</i>
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Is Gas Actually Connected? Yes No

Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>	Date Connected	Address (give address to which approved copy of this form is to be sent)
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If gas is not being sold, give reasons and also explain its present disposition:
no market - Gas vented

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) <input checked="" type="checkbox"/>
Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	<i>Subsidiary-Wellhead Pool</i>
Casing head gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

Remarks
To place the well in production in accordance with the provisions of the act

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

OIL CONSERVATION COMMISSION		By <i>[Signature]</i>
Approved by <i>[Signature]</i>		Title <i>Division Superintendent</i>
Title		Company <i>Continental Oil Company</i>
Date		Address <i>Houston, T.A.</i>