

NUMBER OF COPIES RECEIVED	
DISTRIBUTION	
MAN APT	
FILE	
UNIT	
CARD OFFICE	
THE OPERATOR	OIL
	GAS
REGISTRATION OFFICE	
OPERATION	

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 TEXACO Inc.				Lease State of New Mexico "AE"		Well No. 9	
Unit Letter C	Section 12	Township 18-S	Range 34-E	County Lea			
Pool Vacuum Abo Reef				Kind of Lease (State, Fed, Fee) State			
If well produces oil or condensate give location of tanks			Unit Letter F	Section 12	Township 18-S	Range 34-E	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> Texas New Mexico Pipe Line Company				Address (give address to which approved copy of this form is to be sent) P. O. Box 1510 Midland, Texas			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
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)			

If gas is not being sold, give reasons and also explain its present disposition:

To be connected later.

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

New Well ☐
Change in Transporter (check one)
Oil ☒ Dry Gas ☐
Casing head gas . ☐ Condensate.. ☐


Change in Ownership ☐
Other (explain below)

Remarks

To change pool name from Undesignated to Vacuum Abo Reef.

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 9th day of September, 19 63.

OIL CONSERVATION COMMISSION		By		E. H. Scott
Approved by		Title	District Accountant	
Title		Company	TEXACO Inc.	
Date		Address	P. O. Drawer 728 Hobbs, New Mexico	