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	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)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator Continental Oil Company Lease Sanderson Well No. 7

Unit Letter A Section 24 Township 20S Range 36E County Lincoln

Pool Sanderson Kind of Lease (State, Fed, Fee) State

If well produces oil or condensate give location of tanks _____ Unit Letter A Section 24 Township 20S Range 36E

Authorized transporter of oil or condensate
Continental Oil Company Address (give address to which approved copy of this form is to be sent)
Box 1190 - Hobbs, New Mexico

Is Gas Actually Connected? Yes No

Authorized transporter of casing head gas or dry gas Date Connected _____ Address (give address to which approved copy of this form is to be sent)
Continental Oil Company Box 1189 - Hobbs, New Mexico

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

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

New Well Change in Ownership
Change in Transporter (check one) Other (explain below)
Oil Dry Gas
Casing head gas . Condensate.. Change in Lease and/or well design

Remarks
Formerly Sanderson A-1111, No. 7

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.
Executed this the 9 day of January, 19 62

OIL CONSERVATION COMMISSION	By <u>F. M. A. [Signature]</u>
	Title <u>District Superintendent</u>
Approved by <u>[Signature]</u>	Company <u>Continental Oil Company</u>
Title _____	Address <u>Box 4 - Hobbs, New Mexico</u>
Date _____	