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S.E.S.	
AND 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)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator **Amerada Pet. Corp.** Lease **E. S. Adkins** Well No. **3**

Unit Letter **M** Section **5** Township **20-S** Range **37-E** County **Lea**

Pool **Eumont** Kind of Lease (State, Fed, Fee) **State - Protected**

If well produces oil or condensate give location of tanks _____ Unit Letter _____ Section _____ Township _____ Range _____

Authorized transporter of oil or condensate Address (give address to which approved copy of this form is to be sent) **706**

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) **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 name of transporter

Remarks

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.
Executed this the **30th** day of **January**, 19**61**.

OIL CONSERVATION COMMISSION		By
Approved by		Title
Title		Asst. Dist. Supt.
Date		Company
		Amerada
		Address
		Drawer "D" - Monument, New Mex.