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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 **TEXACO Inc.** Lease **15** Well No. **1**  
*B. V. Lynch (65)*

Unit Letter **J** Section **34** Township **20-S** Range **34-E** County **Lea**

Pool **Lynch** Kind of Lease (State, Fed, Fee) **Federal**

If well produces oil or condensate give location of tanks \_\_\_\_\_ Unit Letter **K** Section **34** Township **20-S** Range **34-E**

Authorized transporter of oil  or condensate   
**Texas-New Mexico Pipe Line** 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 \_\_\_\_\_ No \_\_\_\_\_

Authorized transporter of casing head gas  or dry gas  Date Connected **April 17 1961** Address (give address to which approved copy of this form is to be sent)  
**\*Phillips Petroleum Company** **Odessa, Texas**

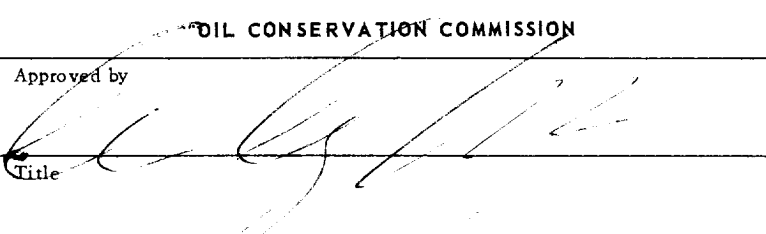
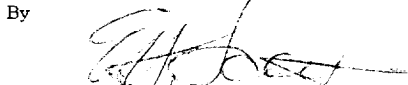
If gas is not being sold, give reasons and also explain its present disposition:

**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..

Remarks  
**\* This C-110 filed to show casing head gas connection.**

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.  
Executed this the 11th day of May, 19 61.

Approved by 	By 
	Title <b>District Accountant</b>
Title	Company <b>TEXACO Inc.</b>
Date	Address <b>P.O. Box 352-Midland, Texas</b>