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LAND OFFICE	
TRANSPORTER	OIL GAS
PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COM. SION  
SANTA FE, NEW MEXICO  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS**

HUBBS OFFICE O.C.C.  
Aug 6 2 45 PM '64  
FORM C-110  
HUBBS OFFICE O.C.C.

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>Coastal States Gas Producing Company</b>				Lease <b>Sinclair State</b>		Well No. <b>2</b>	
Unit Letter <b>J</b>	Section <b>20</b>	Township <b>9-S</b>	Range <b>33-E</b>	County <b>Lea</b>			
Pool <b>Undesignated</b>				Kind of Lease (State, Fed, Fee) <b>State</b>			
If well produces oil or condensate give location of tanks			Unit Letter <b>J</b>	Section <b>20</b>	Township <b>9-6</b>	Range <b>33-E</b>	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>The Permian Corporation</b>				Address (give address to which approved copy of this form is to be sent) <b>P. O. Box 3119, Midland, Texas</b>			
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 Con- nected	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:

**Flared - No Present Market.**


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

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

Executed this the 3rd day of August, 19 64.

OIL CONSERVATION COMMISSION		By
Approved by		Title
Title		<b>Production Superintendent</b>
Date	Company <b>Coastal States Gas Producing Company</b>	
	Address <b>P. O. Box 385, Abilene, Texas</b>	