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U.S.G.S.	
LAND 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 Coastal States Gas Producing Company				Lease Skelly State		Well No. 3
Unit Letter H	Section 20	Township 9-S	Range 33-E	County Lea		

Pool Flying "M" (San Andres)	Kind of Lease (State, Fed, Fee) State
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If well produces oil or condensate give location of tanks	Unit Letter H	Section 20	Township 9-S	Range 33-E
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Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> McWood Corporation	Address (give address to which approved copy of this form is to be sent) 306 V & J Tower Building Midland, Texas
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Is Gas Actually Connected? Yes _____ No **X**

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

Flared - No Present Market.

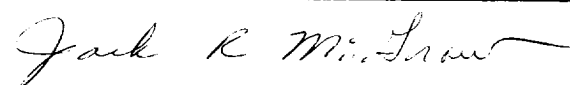
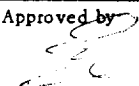
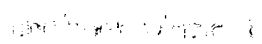
REASON(S) FOR FILING (please check proper box)

- | | |
|--|--|
| New Well <input type="checkbox"/> | Change in Ownership <input type="checkbox"/> |
| Change in Transporter (check one) | Other (explain below) X |
| Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> | Change in Pool Designation |
| Casing head gas . <input type="checkbox"/> Condensate.. <input type="checkbox"/> | |

Remarks

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

Executed this the **1st** day of **September**, 19 **64**.

OIL CONSERVATION COMMISSION		By 
Approved by 	Title Division Engineer	
Title 	Company Coastal States Gas Producing Company	
Date SEP 3 1964	Address P. O. Box 385, Abilene, Texas	