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| SANTA FE                  |            |
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| TRANSPORTER               | OIL<br>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<br><b>Shell Oil Company</b>  |                     |                        |                                  | Lease<br><b>Trigg-Federal</b>   |                        | Well No.<br><b>1</b> |  |
| Unit Letter<br><b>S</b>  | Section<br><b>5</b> | Township<br><b>16S</b> | Range<br><b>31E</b>              | County<br><b>Eddy</b>   |                        |                      |  |
| Pool<br><b>North Square Lake-Grayburg/San Andres</b>   |                     |                        |                                  | Kind of Lease (State, Fed, Fee)<br><b>Federal</b>   |                        |                      |  |
| If well produces oil or condensate<br>give location of tanks   |                     |                        | Unit Letter<br><b>S</b>          | Section<br><b>5</b>   | Township<br><b>16S</b> | Range<br><b>31E</b>  |  |
| Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/><br><b>Continental Pipe Line Company</b> |                     |                        |                                  | Address (give address to which approved copy of this form is to be sent)<br><b>P. O. Box 367, Artesia, New Mexico</b> |                        |                      |  |
| Is Gas Actually Connected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>   |                     |                        |                                  |   |                        |                      |  |
| Authorized transporter of casing head gas <input checked="" type="checkbox"/> or dry gas <input type="checkbox"/><br><b>Skelly Oil Company</b>   |                     |                        | Date Connected<br><b>11-8-62</b> | Address (give address to which approved copy of this form is to be sent)<br><b>P. O. Box 1135, Eunice, New Mexico</b> |                        |                      |  |

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)  
 Oil ..... ☐ Dry Gas ..... ☐  
 Casing head gas ☒ Condensate .. ☐  
 Other (explain below)

**RECEIVED**  
**NOV 13 1962**  
**ARTESIA**

Remarks

**From none to Skelly Oil Company**

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

Executed this the 9th day of November, 1962.

**OIL CONSERVATION COMMISSION**

Approved by

Title

Date

By

**S. B. Deal**

Title

**Division Production Superintendent**

Company

**Shell Oil Company**

Address

**P. O. Box 1858, Roswell, New Mexico**

**NOV 13 1962**

**OIL AND GAS INSPECTOR**