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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
PRORATA OFFICE		
OPERATOR		

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

**RECEIVED**  
FORM C-110  
(Rev. 7-1-60)  
JAN 19 1961  
**D. E. C.**  
**ARTESIA OFFICE**  
Well No. **1**

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>Frank G. Waters Oil Company</b>				Lease <b>Torres</b>	
Unit Letter <b>P</b>	Section <b>9</b>	Township <b>18</b>	Range <b>26</b>	County <b>Hddy</b>	
Pool <b>Atoka</b>				Kind of Lease (State, Fed, Fee) <b>Patented</b>	
If well produces oil or condensate give location of tanks		Unit Letter <b>P</b>	Section <b>9</b>	Township <b>18</b>	Range <b>26</b>
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>			Address (give address to which approved copy of this form is to be sent)		
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 Connected	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.**

**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)
Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>	
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 17 day of January, 1961.

OIL CONSERVATION COMMISSION

Approved by

Title

**OIL AND GAS INSPECTOR**

Date

**JAN 19-61**

By

Title

Company

Address

**P. O. Box 144, Artesia, New Mexico**