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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 <b>A. S. Silverthorne</b>				Lease <b>Kenwood Fed.</b>		Well No. <b>2</b>	
Unit Letter <b>MM</b>	Section <b>30</b>	Township <b>18 S</b>	Range <b>31 E</b>	County <b>Sddy</b>			
Pool <b>Shugart</b>				Kind of Lease (State, Fed, Fee) <b>Fed.</b>			
If well produces oil or condensate give location of tanks			Unit Letter <b>MM</b>	Section <b>30</b>	Township <b>18 S</b>	Range <b>31 E</b>	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>McWood Corporation</b>				Address (give address to which approved copy of this form is to be sent) <b>Midland, Texas</b>			
Is Gas Actually Connected? Yes _____ No _____							
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:

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

New Well ..... ☐  
 Change in Transporter (check one)  
 Oil ..... ☐ Dry Gas .... ☐  
 Casing head gas . ☐ Condensate.. ☐

Change in Ownership ..... ☐  
 Other (explain below)

**RECEIVED**  
**JAN 25 1962**  
**U. S. G.**  
**ARTESIA, OFFICE**

Remarks

change in pool designation effective March 1962

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

Executed this the 25 day of January, 19 62.

OIL CONSERVATION COMMISSION		By
Approved by	<i>M. L. Armstrong</i>	<i>A. D. Fryman</i>
Title		Consultant-Agent
Title <b>OIL AND GAS INSPECTOR</b>		Company <b>A. S. Silverthorne</b>
Date <b>JAN 25 1962</b>		Address <b>1503 Washington, Artesia, N. M.</b>