

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

Form C-110

Revised 7/1/55

(File the original and 4 copies with the appropriate district office)

JUL 5 1957

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Oil Cons. Comm.
ARTESIA OFFICE

Company or Operator Everett D. Burgett Lease Magnolia State

Well No. 1 Unit Letter E S 14 T 21 R 27 Pool Agua de Vatos

County ddy Kind of Lease (State, Fed. or Patented) State

If well produces oil or condensate, give location of tanks: Unit E S 14 T 21 R 27

Authorized Transporter of Oil or Condensate Everett D. Burgett

Address 102 E. Canal Carlsbad, N. Mex.

(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas _____

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:

Reasons for Filing: (Please check proper box) New Well _____ ()

Change in Transporter of (Check One): Oil (☒) Dry Gas () C'head () Condensate ()

Change in Ownership _____ () Other _____ ()

Remarks: _____ (Give explanation below)

Since I have only sold what oil this well makes to Maseo which is the original transporter I would like to have the authorization to transport and sell the oil from this well and file the purchasers name on the bill each month. Also this well has been shut in for the last few months.

I am asking for an allowable on it starting the 10 of July

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

Executed this the _____ day of _____ 19 _____

By Everett D. Burgett

Approved JUL 8 1957 _____ 19 _____

Title Operator

OIL CONSERVATION COMMISSION

Company same

By M. L. Armstrong

Address 102 E. Canal Carlsbad, N. Mex.

Title OIL AND GAS INSPECTOR

WILDLIFE CONSERVATION COMMISSION		
ADDESIS DISTRICT OFFICE		
Date Recd _____		
BY _____		
RECEIVED		
Count	_____	_____
Count	_____	_____
Examination officer	_____	_____
State Land Office	_____	_____
W.C.C.P.	_____	_____
Transporter	_____	_____
