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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 *TEXACO Inc.	Lease ***Northeast Caprock (Queen) Unit	Well No. **1122
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Unit Letter D	Section 22	Township 12S	Range 32E	County Lea
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Pool Caprock Queen	Kind of Lease (State, Fed, Fee) Federal
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If well produces oil or condensate give location of tanks	Unit Letter D	Section 22	Township 12S	Range 32E
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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)
The Permian Corporation	Box 4157 - Midland, Texas

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)
None		

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

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

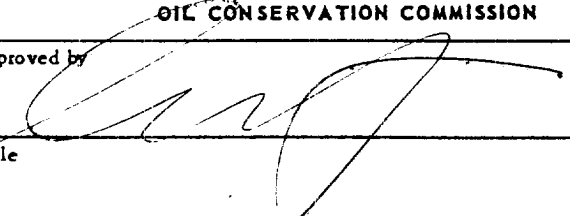
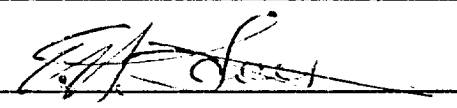
New Well <input type="checkbox"/>	Change in Ownership <input type="checkbox"/>
Change in Transporter (check one)	Other (explain below)
Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Casing head gas . <input type="checkbox"/> Condensate . . <input type="checkbox"/>	

Remarks

*To change operator from Sinclair Oil & Gas Company to TEXACO Inc.
 **To change well no. from #1 to #1122.
 ***To change lease name from Federal 22 to Northeast Caprock (Queen) Unit.

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

Executed this the 1st day of June, 19 62.

OIL CONSERVATION COMMISSION Approved by  Title Date	By 
	Title District Accountant
	Company TEXACO Inc.
	Address P. O. Box 728 - Hobbs, New Mexico