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

MEXICO OIL CONSERVATION COM. N  
 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

NOV 20 10 48 AM '63

Company or Operator: **Socony Mobil Oil Company, Inc.** Lease: **New Mex "F"** Well No.: **1**

Unit Letter: **D** Section: **36** Township: **20 S** Range: **38 E** County: **Lea**

Pool: **Warren-Drinkard** Kind of Lease (State, Fed, Fee): **State**

If well produces oil or condensate give location of tanks: \_\_\_\_\_ Unit Letter: **D** Section: **36** Township: **20 S** Range: **38 E**

Authorized transporter of oil  or condensate   
**Socony Mobil Oil Company, Inc.** Address (give address to which approved copy of this form is to be sent): **P. O. Box 1800, Hobbs, New Mexico**

Is Gas Actually Connected? Yes  No

Authorized transporter of casing head gas  or dry gas  Date Connected: **11/8/60** Address (give address to which approved copy of this form is to be sent): **Box 1135, Eunice, New Mexico**

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

Remarks: **Filed to show destination of Casinghead Gas and complete files.**

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

Executed this the 20th day of November, 19 63.

OIL CONSERVATION COMMISSION	By
	<i>J. J. McDaniel</i>
Approved by	Title
<i>[Signature]</i>	<b>Group Supervisor</b>
Title	Company
	<b>Socony Mobil Oil Company, Inc.</b>
Date	Address
	<b>Box 1800, Hobbs, New Mexico</b>