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				Lease	Well No.
Unit Letter	Section	Township	Range	County	
Pool				Kind of Lease *(State, Fed, Fee)*	
If well produces oil or condensate give location of tanks	Unit Letter	Section	Township	Range	

Authorized transporter of oil ☐ or condensate ☐

Address *(give address to which approved copy of this form is to be sent)*

Is Gas Actually Connected? Yes _____ No _____

Authorized transporter of casing head gas ☐ or dry gas ☐ 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)*

Remarks

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

Executed this the _____ day of _____, 19____.

OIL CONSERVATION COMMISSION	By
Approved by	Title
Title	Company
Date	Address

ILLEGIBLE