

NUMBER OF COPIES RECEIVED DISTRIBUTION		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 ROBERT A. DEAN		Lease Weathersby		File No. 1
Unit Letter D	Section 24	Township 8-S	Range 34E	County Roosevelt
Pool Milnesand (San Andres)			Kind of Lease (State, Fed, Fee) Fee	
If well produces oil or condensate give location of tanks		Unit Letter D	Section 24	Township 8-S
		Range 34-E		
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> Magnolia Pipeline Company		Address (give address to which approved copy of this form is to be sent) P. O. Box 606, Seminole, Texas		
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				
Authorized transporter of casing head gas <input checked="" type="checkbox"/> or dry gas <input type="checkbox"/> Sinclair Oil and Gas Company Warren		Date Connected 1-7	Address (give address to which approved copy of this form is to be sent) P. O. Box 1470, Midland, Texas Box 1589, Tulsa, Okla.	
If gas is not being sold, give reasons and also explain its present disposition: <p style="text-align: center;">Line is now being constructed</p>				
REASON(S) FOR FILING (please check proper box)				
New Well <input type="checkbox"/> Change in Ownership <input type="checkbox"/> Change in Transporter (check one) Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/> Casing head gas. <input type="checkbox"/> Condensate.. <input type="checkbox"/>				
Other (explain below) and to authorize Sinclair as Transporter of gas which is now being hooked up for the first time.				
Remarks				
The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.				
Executed this the <u>31st</u> day of <u>March</u> , 19 <u>63</u> .				
OIL CONSERVATION COMMISSION		By <u>Robert A. Dean</u>		
Approved by <u>[Signature]</u>		Title Operator		
Title <u>[Signature]</u>		Company ROBERT A. DEAN		
Date <u>[Signature]</u>		Address P. O. Box 4773, Midland, Texas		