NUMBER OF COPIES RECEIVED			
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U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
PRORATION 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	Lease	Well No.
Tom L. Ingram	Anderson	1

Unit Letter	Section	Township	Range	County
	29	8-South	37-East	Roosevelt

Pool	Kind of Lease (State, Fed, Fee)
	Federal

If well produces oil or condensate give location of tanks	Unit Letter	Section	Township	Range
			8-South	37-East

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 __X__ 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 Ownership .... ☐

Change in Transporter *(check one)*   Other *(explain below)*   X

   Oil .... ☐   Dry Gas .... ☐

   Casing head gas . ☐   Condensate.. ☐

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	*Martha J. West*
	Title
Title	Company
Date	Address