

NUMBER OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
PRORATION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION SANTA FE, NEW MEXICO	FORM C-110 (Rev. 7-60)
<b>CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS</b>	
FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE	

Company or Operator <b>LEONARD NICHOLS</b>				Lease <b>FILE</b>	Dec No. <b>25</b>
Unit Letter <b>6</b>	Section <b>10</b>	Township <b>27</b>	Range <b>32</b>	County <b>LEA</b>	

Pool <b>MALJAMAR</b>	Kind of Lease (State, Fed, Fee) <b>FED.</b>			
If well produces oil or condensate give location of tanks	Unit Letter <b>6</b>	Section <b>10</b>	Township <b>27</b>	Range <b>32</b>

Authorized transporter of oil <input type="checkbox"/> or condensate <input type="checkbox"/> <b>T. W. M.</b>	Address (give address to which approved copy of this form is to be sent)
--	--

Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
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)

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  
**THIS REPORT IS TO SHOW CORRECT LOCATION OF TANK BATTERY**

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

Executed this the **20** day of **DECEMBER**, 19**62**.

OIL CONSERVATION COMMISSION		By
Approved by		<b>O.L. McCUTCHEON</b>
Title		<b>SUP.</b>
Date	Company	<b>LEONARD NICHOLS</b>
	Address	<b>MALJAMAR, NEW MEXICO</b>