SANTA F e, ne	RVATION CC AISSION Form C-110 W MEXICO Revised 7/1/55
(File the original and 4 copies with	the appropriate district office) HOBBS OFFICE OCC
CERTIFICATE OF COMPLIAN	
Company or Operator CONTINENTAL OIL CON	PANY Lease State 0
Well No. 1 Unit Letter N S 16 T	17 R 32 Pool Maljamar
County_Lea Kind of Lease	e (State, Fed. or Patented) State
If well produces oil or condensate, give loca	tion of tanks: Unit E S 16 T 17 R 32
Authorized Transporter of Oil or Condensate	e Texas-New Mexico Pipeline Co.
Address Midland, Texas	
(Give address to which approved	
Authorized Transporter of Gas	None
Address	Date Connected
(Give address to which approved	copy of this form is to be sent)
If Gas is not being sold, give reasons and al	
Small amount produced is used for lease for	

Reasons for Filing: Please check proper box	() New Well
Change in Transporter of (Check One): Oil () Dry Gas () C'head () Condensate ()
Change in Ownership(X) Other()
Change in Ownership (X Remarks:) Other () (Give explanation below)
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