NUMBLH OF COPIES RECEIVED CISTAIBUTION SANTA FI FILE U.S.G.S. LAND OF FICE OIL	CERTIFI	CATE OF CO	TA FE, NEW M	AND AUTHORIZA	FORM C-110 (Rev. 7-60)
TRANSPORTER GAS GAS PHORATION OFFICE OPERATOR				NATURAL GAS	
Company or Operator	· · · · · · · · · · · · · · · · · · ·	RIGINAL AND 4 C		E APPROPRIATE OFFIC Lease	Well No.
Caetus Drilli Unit Letter Secu		Range	1	County	"A" 3
X 10	16		32 •	J. Cat	
Pool Kind of Lease (State, Fed, Fee) State					919
If well produces oil or condensate give location of tanks		Unit Letter	Section 16	Township 16 8	Range my 32 K
Authorized transporter of oil	ico Pipeline		Bx 1510	dress to which approved copy , , Midland, Text	
Is Gas Actually Connected? YesNo 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) rected If gas is not being sold, give reasons and also explain its present disposition:					
Change Oil	REASO ell in Transporter (check ond To Dry ing head gas Cond	e) Gas		rship [
TO: Texas-N	ew Mexico Pip	eline Comp	any	mian Corporati	
The undersigned certifies tha	•••				d with.
	cuted this the		By	, 19 _64 .	
Approved by	RVATION COMMISSION	l	- Ye	. w Bak	Per-
A			Title Vice Pro		
fitle 20 juine	e Doblict i		Company	Prilling Company	A y
Date			Address P O Box	1826, Hobbs, 1	New Mer

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