NUMBER OF COPIES RECEIVED	<del></del>	<del>-</del> -					
DISTRIBUTION SANTA FE		N	IEW MEX	ICO OIL	CONSERVA	TION COMSSION	FORM C-110
FILE					TA FE, NEW I		· -
U.S.G.S.					•	- 5	(Rev. 7-60)
LAND OFFICE OIL		CERTIFIC	CATE (	OF CO	MPLIANCE	AND AUTHORIZATION	١
TRANSPORTER GAS		TO	TRAN	ISPOR	T OIL AND	NATURAL GAS	
PRORATION OFFICE OPERATOR							
		FILE THE O	RIGINAL	AND 4 C	OPIES WITH T	HE APPROPRIATE DEFICE	
Company or Operator					19 July	Lease	Well No.
	C W	TRAINER				C*	•
Unit Letter Section		ownship		Range		Simmons County	
_	-	-	İ	i		_	
Pool L 10		18-South		38	-East	Lea (St. E. J. E. )	····
	C					Kind of Lease (State, Fed, Fee)	
Bishop Canyon San Andres  If well produces oil or condensate  Unit Letter					Section	Township Re	
If well produces oil or give location of	sate	Unit Lett	er		<b>{</b>	inge	
give location of		<u> </u>	<u> </u>	10	18-South	38-East	
Authorized transporter of oil X or condensate					Address (give a	ddress to which approved copy of this	s form is to be sent)
Wastern Oil Transportation D. O. Day 4107							
Western Oil Transportation P. O. Box 4187							
					Midland	, Texas	
		Is Gas Ac	tually C	onnected	d? Yes	_NoX	
Authorized transporter of casing h	ead gas	or dry gas	Date	Con-	Address (give a	ddress to which approved copy of this	s form is to be sent)
	6	or any gas	necte	ed	, ,		,,
If gas is not being sold, give rease	ons and	also explain its	present dis	position:			· · · · · · · · · · · · · · · · · · ·
New Well - Gas not connected yet.							
-							
		REASO	N(S) FOR	FILING	Inlease check	ntoner how!	<del></del>
REASON(S) FOR FILING (please check proper box)							
New Well Change in Ownership							
Change in Transporter (check one) Other (explain below)							
Oil Dry Gas							
Casing head gas . Condensate							
Remarks				<del></del>			
Remarks							
The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.							
Execu	ted this	s the 31st	day of _	Dec	ember	, 19 <b>62</b>	
OIL CONCERN				·	Ву	7///	
OIL CONSERV	ATION	N COMMISSION					<b>\</b>
Approved by						((//////	1
					Title C W Trainer		
					C. W. Trainer		
Title					Company	Owner - Operator	
					Сопрацу		
Data					A.11.	C. W. TRAINER	
Date					Address	P. O. Box 2222	
				1		Hobbs, New Mexico	