NUMBER OF COMIES RECEIVED  GISTHIBUTION SANTA F.  FILL  U.S. G. S.  LAND OFFICE  TRANSPORTER  GAS  MIGHATION OFFICE  OPERATOR		NEW MEXICO OIL CONSERVATION CO! SSION  SANTA FE, NEW MEXICO  CERTIFICATE OF COMPLIANCE AND AUTOBORDED CO.C.  TO TRANSPORT OIL AND NATURAL GAS  MAY 19 11				
Company or Operator		FILE THE ORIGINAL	AND 4 COL	PIES WITH TH	HE APPROPRIATE OFF AUE	Well No.
	TEXACO Inc	2.			State of N. M. "AE'	16
Unit Letter C	Section 1	Township 18-S	Range 34	- <b>-</b> E	County Lea	
Pool Vacuum	Abo Reef				Kind of Lease (State, Fed, Fee) State	
If well produces oil or condensate give location of tanks   Unit Letter   F				Section 12	Township 18-S	Range 34-E
Authorized transporter of Texas -No		densate 🗌 Pipe Line Company		P. O. Bo Midland,	-	this form is to be sent)
		Is Gas Actually C			_ No	
Authorized transporter of casing head gas X or dry gas Date Connected  * TEXACO Inc.  1-29-64				Address (give address to which approved copy of this form is to be sent)  P. O. Box 728  Hobbs, New Mexico		
	Change in Tran	REASON(S) FOR  sporter (check one)  Dry Gas  d gas. Condensate			ership	
	Casing near	i gas i Condensate i .				
-	C-110 Fil	ed To Show Change	In Cas	ing Head (	Gas Transporter To	
The undersigned certi	fies that the R	ules and Regulations of t	ne Oil Cons	servation Com	mission have been complied w	ith.
	Executed t	his the <u>19th</u> day of			<u>, 19 64.</u>	
	CONSERVATI	ON COMMISSION		By	745 CS	_
Approved by			-	Title	E. H. Scott District Accountant	

Company

Address

TEXACO Inc.

P. O. Box 728

Hobbs, New Mexico

Complete State

 $\xi_{\perp}$ 

Date