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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION  
SANTA FE, NEW MEXICO  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
(Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator				Lease <b>M E Caylor</b>		Well No. <b>1</b>	
Unit Letter <b>MM</b>	Section <b>6</b>	Township <b>17-S</b>	Range <b>37-E</b>	County			
Pool <b>Levington Paddock</b>				Kind of Lease (State, Fed, Fee) <b>Fee</b>			
If well produces oil or condensate give location of tanks		Unit Letter <b>MM</b>	Section <b>6</b>	Township <b>17-S</b>	Range <b>37-E</b>		
Authorized transporter of oil <input type="checkbox"/> or condensate <input type="checkbox"/>				Address (give address to which approved copy of this form is to be sent)			
Is Gas Actually Connected? Yes <input checked="" type="checkbox"/> No <input 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

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

Executed this the \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_.

OIL CONSERVATION COMMISSION		By	
Approved by		Title	
Title		Company	
Date		Address	