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TRANSPORTER OIL			
GAS			
PRORATION 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	Well No.
Gulf Oil Corporation	**Graham State (NCT-F)**	**2**

Unit Letter	Section	Township	Range	County
I	**36**	**19S**	**36E**	**Lea**

Pool	Kind of Lease (State, Fed, Fee)
Monument	**State**

If well produces oil or condensate give location of tanks	Unit Letter	Section	Township	Range
	O	**36**	**19S**	**36E**

Authorized transporter of oil ☒ or condensate ☐

Shell Pipeline Corporation

Address *(give address to which approved copy of this form is to be sent)*

P. O. Box 1930, Midland, Texas

Is Gas Actually Connected? Yes ✗ No _____

Authorized transporter of casing head gas ☒ or dry gas ☐ | Date Connected

Warren Petroleum Corporation

Address *(give address to which approved copy of this form is to be sent)*

P. O. Box 1589, Tulsa, Oklahoma

If gas is not being sold, give reasons and also explain its present disposition:

REASON(S) FOR FILING *(please check proper box)*

New Well . . . . ☐
Change in Transporter *(check one)*
   Oil . . . . ☐   Dry Gas . . . . ☐
   Casing head gas . ☐   Condensate. . ☐

Change in Ownership . . . . ☐
Other *(explain below)*

Change oil transporter effective 12-1-64

Remarks

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

Executed this the ___ day of _____ , 19_64_.

OIL CONSERVATION COMMISSION	By
Approved by:	
Title	Title
Supervisor - District #1	Area Production Manager
Date	Company
	Gulf Oil Corporation
	Address
	Hobbs, N.M.