

COPIES RECEIVED	
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SANTA FE	
FILL	
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 <b>Gulf Oil Corporation</b>				Lease <b>Bell Ramsay (NCT-B)</b>		Well No. <b>2</b>	
Unit Letter <b>M</b>	Section <b>33</b>	Township <b>20-S</b>	Range <b>37-E</b>		County		
Pool <b>Emont Gas</b>				Kind of Lease (State, Fed Fee) <b>State</b>			
If well produces oil or condensate give location of tanks		Unit Letter	Section	Township	Range		
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)				
<b>Northern Natural Gas Company</b>			<b>P. O. Box 2376, Hobbs, New Mexico</b>				

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

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

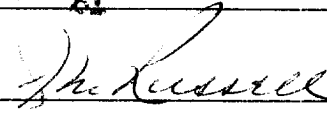
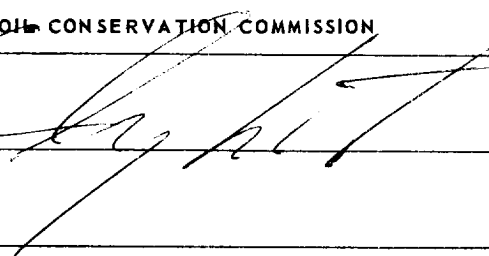
New Well ..... ☐ Change in Ownership ..... ☐  
 Change in Transporter (check one) Other (explain below) ☒  
 Oil ..... ☐ Dry Gas .... ☐  
 Casing head gas . ☐ Condensate . . ☐

**To change name of gas transporter.**

Remarks

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

Executed this the 21st day of February, 19 62.

<b>OIL CONSERVATION COMMISSION</b>		By	
Approved by		Title	<b>Area Production Manager</b>
Title		Company	<b>Gulf Oil Corporation</b>
Date		Address	<b>P. O. Box 2167, Hobbs, New Mexico</b>