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	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 Culf Oil Corporation				Lease Emice King		Well No. 6	
Unit Letter D	Section 28	Township 21-S	Range 37-E	County Lea			
Pool Emport Gas				Kind of Lease (State, Fed Fee) Fee			
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 checked="" type="checkbox"/>			Date Connected	Address (give address to which approved copy of this form is to be sent)			
Northern Natural Gas Company				P. O. Box 2376, Hobbs, New Mexico			

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

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

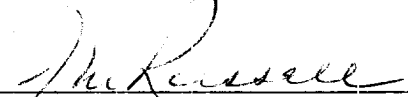
New Well <input type="checkbox"/>	Change in Ownership <input type="checkbox"/>
Change in Transporter (check one)	Other (explain below) <input checked="" type="checkbox"/>
Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Casing head gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

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 24th day of February, 19 61.

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