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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION  
SANTA FE, NEW MEX

FORM C-110  
(Rev. 7-60)

# CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>Gulf Oil Corporation</b>				Lease <b>Eunice King</b>		Well No. <b>22</b>	
Unit Letter <b>C</b>	Section <b>28</b>	Township <b>21-S</b>	Range <b>37-E</b>		County		
Pool <b>Tubb</b>				Kind of Lease (State, Fed, Fee) <b>Fee</b>			
If well produces oil or condensate give location of tanks		Unit Letter <b>G</b>	Section <b>28</b>	Township <b>21-S</b>	Range <b>37-E</b>		
Authorized transporter of oil <input type="checkbox"/> or condensate <input checked="" type="checkbox"/> <b>Shell Pipeline Corp.</b>				Address (give address to which approved copy of this form is to be sent) <b>Box 1598, Hobbs, N. M.</b>			
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) <b>P. O. Box 2376, Hobbs, New Mexico</b>				
<b>Northern Natural Gas Company</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)  
 Oil ..... ☐ Dry Gas ..... ☐  
 Casing head gas . ☐ Condensate . . ☐  
 Other (explain below) ☒

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

Approved by

Title

Date

By

Title

Company

Address

**Area Production Manager**

**Gulf Oil Corporation**

**P. O. Box 2167, Hobbs, New Mexico**