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U.S.C.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 Gulf Oil Corporation				Lease H. T. Mattern (NCT-B)		Well No. 5	
Unit Letter 0		Section 30		Township 21-S		Range 37-E	
Pool Esment Gas						Kind of Lease (State, Fed Fee) Lease Fee	

If well produces oil or condensate give location of tanks		Unit Letter		Section		Township		Range	
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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) 120			
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Is Gas Actually Connected? Yes ☒ No ☐

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) P. O. Box 2376, Hobbs, New Mexico			
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If gas is not being sold, give reasons and also explain its present disposition:

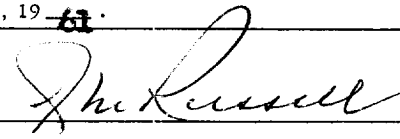
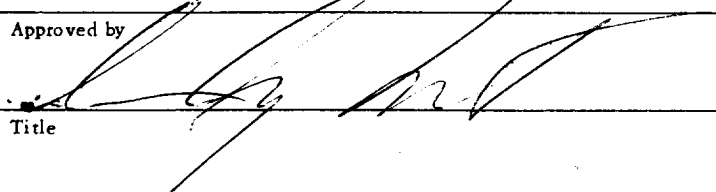
REASON(S) FOR FILING (please check proper box)

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 <u>24th</u> day of <u>February</u> , 19 <u>61</u> .	
By 	
Title Area Production Manager	
Company Gulf Oil Corporation	
Address P. O. Box 2167, Hobbs, New Mexico	
Approved by 	
Title	
Date	