

NUMBER OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
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				Lease <b>H. T. Orcutt (NCT-A)</b>		Well No. <b>3</b>	
Unit Letter <b>K</b>	Section <b>5</b>	Township <b>21S</b>	Range <b>36E</b>		County		
Pool <b>Emice</b>				Kind of Lease (State, Fed, Fee) <b>State</b>			
If well produces oil or condensate give location of tanks			Unit Letter <b>M</b>	Section <b>5</b>	Township <b>21S</b>	Range <b>1</b>	<b>36E</b>
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 _____ No _____							
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)			

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)	
Oil ..... <input type="checkbox"/>	Dry Gas .... <input type="checkbox"/>
Casing head gas . <input type="checkbox"/>	Condensate . . <input type="checkbox"/>

Other (explain below)

Remarks

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

Executed this the \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_.

**OIL CONSERVATION COMMISSION**

Approved by

Title

Date

By

Title

Company

Address