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LAND OFFICE	
TRANSPORTER	OIL GAS
PROBATION 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>Culf Oil Corporation</b>				Lease <b>H. C. Collins</b>		Well No. <b>4</b>	
Unit Letter <b>K</b>	Section <b>14</b>	Township <b>21-S</b>	Range <b>36-E</b>	County <b>Lea</b>			
Pool <b>Mount 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)  <b>X</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:

**ILLEGIBLE**

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

New Well ..... ☐  
 Change in Transporter (check one)  
 Oil ..... ☐ Dry Gas .... ☐  
 Casing head gas . ☐ Condensate.. ☐

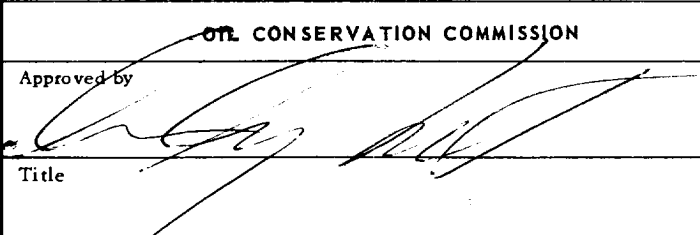
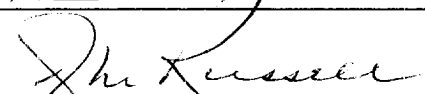
Change in Ownership . . . ☒ ..... ☐  
 Other (explain below)

**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**.

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