| NUMBER OF COPIES RECEIVED | | | | | | |
|--|---|--------------------|-------------------------|----------------------------------|-----------------------------------|--|
| DISTRIBUTION | ⊒ ∤ н | EW MEXICO OI | L CONSERVAT | ION CON SION | FORM C-110 | |
| SANTA FE. | 7 | CAN | TA FE, NEW M | IE VICO | (Rev. 7–60) | |
| U.B.G.S. | - | | - | 1.1 | | |
| LAND OFFICE | | ATE OF CO | MPLIANCE | AND AUTHORIZ | ZATION | |
| TRANSPORTER GAS | 1 1 | | 5.4 | NATURAL GAS | 2.0 | |
| PRORATION OFFICE | ⊒ '∪ | INAMOPUL | TI OIL AND | TATORAL GAS | M 10 32 | |
| OPERATOR . | FILE THE OP | IGINAL AND A | COPIES WITH TH | IE APPROPRIATE OF | FICE | |
| | TILL THE OK | TOTAL AITD 4 | COTTES #7717 11 | _ | Well No. | |
| Company or Operator | | | | Lease. | | |
| Penro | se Production (| Company | | (O. Warlick B) | Linebry 1 | |
| Unit Letter Section | Township | Range | | County | | |
| A 19 | 21 | | 37 | Lea | | |
| Pool | | | | Kind of Lease (State, H | Fed Fee) | |
| Blinebry Gas | | | | | Tee | |
| - | | Unit Letter | Section | Township | Range | |
| If well produces oil or condensate give location of tanks | | A | 19 | 23 | 277 | |
| <i>g</i> . (0.10 sultinos 1.10 sulti | A | | Ideas to which approved | copy of this form is to be sent) | | |
| Authorized transporter of oil 🔲 o | r condensate 🗶 | | Address (give as | iaress to witch approved | copy of title form is to be sent) | |
| | | | | - 1640 | | |
| | | | BC | x 1510 | | |
| Texas New Mexico | Texas New Mexico Pipe Line Co. Midland, Texas | | | | | |
| | Is Gas Ac | tually Connect | ed? Yes I | _No | | |
| | | | | | copy of this form is to be sent) | |
| Authorized transporter of casing he | ad gas 🚺 or dry gas [| Date Con- | Address (give at | wess to witch approved | copy of mis joint is to be senty | |
| Bex 1650 | | | | | | |
| i | | | | · · | | |
| Skelly Oil Company | | | | sa, Oklahema | | |
| If gas is not being sold, give reason | ns and also explain its t | resent disposition | : | | | |
| New Well | | | Change in Ownership | | | |
| | Dry (g head gas . Cond | | Chang | e of Operator | | |
| | Operator from ive 3-1-63 | Neville G. | Penrose, In | ne. | | |
| The undersigned certifies that | | | | mission have been con | nplied with. | |
| Execu | ted this the | _ day of | auch | , 19 <i></i> | | |
| | VATION COMMISSION | | By | 906 | - 10 i | |
| Approved by | | | Title | 0001 11 | | |
| | - ' -// | | Company | Office Manager | | |
| Title | | | | | | |
| | | | | Penrose Produc | rtion Company | |
| | | | Address | · MA DES I I VAIN | | |
| Date | | | Address | | | |
| | | | | n 000 - 12 4 | les Nev Mardes | |
| | | | 1 | Box 900, Buni | Lce, New Mexico | |