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	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 <b>TEXACO Inc.</b>				Lease <b>1001 JUL 20 AM 10</b>		Well No. <b>52</b>
Unit Letter <b>I</b>	Section <b>9</b>	Township <b>25-S</b>	Range <b>32-E</b>	County <b>Lea</b>		
Pool <b>Undesignated</b>				Kind of Lease (State, Fed, Fee) <b>Federal</b>		
If well produces oil or condensate give location of tanks		Unit Letter <b>K</b>	Section <b>15</b>	Township <b>25-S</b>	Range <b>32-E</b>	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>  <b>Texas-New Mexico Pipe Line Company</b>				Address (give address to which approved copy of this form is to be sent)  <b>P. O. Box 1510 - Midland, Texas</b>		

Is Gas Actually Connected? Yes \_\_\_\_\_ No **X**

Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>  <b>None</b>	Date Connected  <b>None</b>	Address (give address to which approved copy of this form is to be sent)
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If gas is not being sold, give reasons and also explain its present disposition:

**(TSTM)**


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

New Well ..... **New Well** ..... ☒      Change in Ownership ..... ☐  
Change in Transporter (check one)      Other (explain below)  
Oil ..... ☐      Dry Gas ..... ☐  
Casing head gas . ☐      Condensate.. ☐

Remarks

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

Executed this the **21st** day of **July**, 19 **61**.

OIL CONSERVATION COMMISSION		By
Approved by		Title
Title		<b>Assistant District Superintendent</b>
Date		Company <b>TEXACO Inc.</b>
		Address <b>P. O. Box 728 - Hobbs, New Mexico</b>