

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 TEXACO Inc.				Lease Cotton Draw Unit		Well No. 40
Unit Letter C	Section 10	Township 25 - S	Range 32 - E	County Lea		
Pool Undesignated				Kind of Lease (State, Fed, Fee) Federal		
If well produces oil or condensate give location of tanks		Unit Letter K	Section 15	Township 25 - S	Range 32 - E	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> Texas - New Mexico Pipe Line				Address (give address to which approved copy of this form is to be sent) P.O. Box 1510 - Midland, Texas		

Is Gas Actually Connected? Yes _____ No **X**

Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/> None (TSTM)	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:

(TSTM)

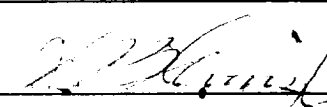
REASON(S) FOR FILING (please check proper box)

- | | |
|--|--|
| New Well <input type="checkbox"/> | Change in Ownership <input type="checkbox"/> |
| Change in Transporter (check one) | Other (explain below) |
| Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> | |
| Casing head gas . <input type="checkbox"/> Condensate . . <input type="checkbox"/> | |

Remarks

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

Executed this the **28th** day of **March**, 19 **61**.

OIL CONSERVATION COMMISSION	By
Approved by	
Title	Assistant District Superintendent
Date	Company TEXACO Inc.
	Address P.O. Box 352 - Midland, Texas