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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>Cotton Draw Unit</b>		Well No. <b>53</b>	
Unit Letter <b>E</b>	Section <b>28</b>	Township <b>25-S</b>	Range <b>32-E</b>	County <b>Lea</b>			
Pool <b>Paduca Delaware</b>				Kind of Lease (State, Fed, Fee) <b>Federal</b>			
If well produces oil or condensate give location of tanks		Unit Letter <b>E</b>	Section <b>28</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 <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/> <b>None</b>		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**


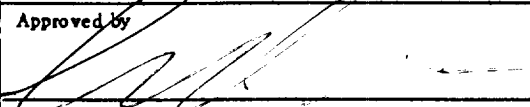
**REASON(S) FOR FILING (please check proper box)**

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

Remarks  
**To change transporter of oil from the Permian Corporation to Texas-New Mexico Pipe Line Company.**

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

Executed this the **23** day of **August**, 19 **62**.

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