NUMBER OF COPIES RECEIVED			
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TRANSPORTER	OIL		
	GAS		
PRORATION OFFICE			
OPERATOR			

NEW MEXICO OIL CONSERVATION COM___ION

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 The Atlantic Refining Company	Lease State 24	Well No. 1

Unit Letter N	Section 32	Township 24	Range 37	County Lea

Pool Jalmat	Kind of Lease (State, Fed,Fee) State

If well produces oil or condensate give location of tanks	Unit Letter	Section	Township	Range

Authorized transporter of oil ☐ or condensate ☐   Address *(give address to which approved copy of this form is to be sent)*

Is Gas Actually Connected?   Yes __X__ No _____

Authorized transporter of casing head gas ☐ or dry gas ☒	Date Connected	Address *(give address to which approved copy of this form is to be sent)*
El Paso Natural Gas Co.	2-6-59	Box 1492, El Paso, Texas

If gas is not being sold, give reasons and also explain its present disposition:

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

New Well . . . . ☐   Change in Ownership . . . . ☐

Change in Transporter *(check one)*   Other *(explain below)*

    Oil . . . . ☐   Dry Gas . . . . ☐

    Casing head gas . ☐   Condensate.. ☐

To comply with N.M.C.C.C. Memo No. 3-63.

Remarks

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

Executed this the __10th__ day of __January__ , 19 _61_.

OIL CONSERVATION COMMISSION	By _A.D.Klafin_ A. D. Klorin
Approved by	Title District Production & Drilling Supervisor
Title	Company The Atlantic Refining Company
Date	Address Box 1978, Roswell, New Mexico