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	GAS
PRORATION 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>Amerada Petroleum Corporation</b>	Lease <b>LMWU</b>	Well No. <b>26-2</b>
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Unit Letter <b>N</b>	Section <b>34</b>	Township <b>24-S</b>	Range <b>37-E</b>	County <b>Lea</b>
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Pool <b>Langlie-Mattix</b>	Kind of Lease (State, Fed, Fee) <b>Patent</b>
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If well produces oil or condensate give location of tanks	Unit Letter <b>N</b>	Section <b>34</b>	Township <b>24S</b>	Range <b>37E</b>
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Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>  <b>Texas-New Mexico Pipe Line Co.</b>	Address (give address to which approved copy of this form is to be sent)  <b>Box 1510, Midland, Texas</b>
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Is Gas Actually Connected? Yes ☒ No ☐

Authorized transporter of casing head gas <input checked="" type="checkbox"/> or dry gas <input type="checkbox"/>  <b>El Paso Nat. Gas Co.</b>	Date Connected	Address (give address to which approved copy of this form is to be sent)  <b>El Paso Nat. Gas Co. Jal, N.M.</b>
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If gas is not being sold, give reasons and also explain its present disposition:

**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 7th day of January, 19 64.

<b>OIL CONSERVATION COMMISSION</b>	By
Approved by	<b>B. A. Moore</b>
Title	<b>Asst. Dist. Supt.</b>
	Company <b>Amerada Petr. Corp.</b>
Date	Address <b>Box 706, Eunice, N.M.</b>