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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 <u>Elwyn C. Hale</u>				Lease <u>Hale State</u>		Well No. <u>3</u>	
Unit Letter <u>H</u>	Section <u>2</u>	Township <u>25 S</u>	Range <u>37 E</u>	County <u>Lea</u>			
Pool <u>North Justis Ellenberger</u>				Kind of Lease (State, Fed, Fee) <u>State</u>			
If well produces oil or condensate give location of tanks			Unit Letter <u>H</u>	Section <u>2</u>	Township <u>25 S</u>	Range <u>37 E</u>	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <u>Texas New Mexico Pipe Line Co.</u> <u>Box 1510 Midland, Texas</u>				Address (give address to which approved copy of this form is to be sent) <u>P.O. Box - 1510 -</u> <u>Midland, Texas</u>			
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"/>			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:

No gas transporter at present,
Gas being vented.

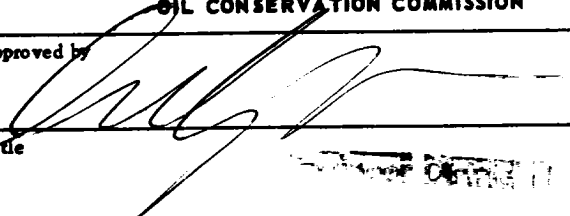
REASON(S) FOR FILING (please check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Ownership <input type="checkbox"/>
Change in Transporter (check one)	
Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	Other (explain below)
Casing head gas . <input type="checkbox"/> Condensate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

Remarks

This well is a quadruple - The other zones
are - Waddell, McKee and Devonian.

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

Executed this the 15 day of October, 1962.

OIL CONSERVATION COMMISSION		By <u>Howard P. Adams</u>
Approved by 		Title <u>Superintendent</u>
Title <u>Elwyn C. Hale</u>		Company <u>Elwyn C. Hale</u>
Date <u>10-15-62</u>		Address <u>Box 667, Hobbs, N. Mex.</u>