

|  |         |  |  |                                  |
|--|---------|--|--|----------------------------------|
| NUMBER OF COPIES RECEIVED<br>DISTRIBUTION  |         | <b>NEW MEXICO OIL CONSERVATION COMMISSION</b><br>SANTA FE, NEW MEXICO<br><b>CERTIFICATE OF COMPLIANCE AND AUTHORIZATION<br/>TO TRANSPORT OIL AND NATURAL GAS</b> |  | <b>FORM C-110</b><br>(Rev. 7-60) |
| FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE   |         |  |  |                                  |
| Company or Operator  |         | Lease  |  | Well No.                         |
| Caulkins Oil Company   |         | Branch #7  |  | PMD-8                            |
| Unit Letter  | Section | Township   | Range  | County                           |
| A  | 34      | 27 North   | 6 West   | Rio Arriba                       |
| Pool   |         | Kind of Lease (State, Fed, Fee)  |  |                                  |
| Basin Dakota   |         | Federal  |  |                                  |
| If well produces oil or condensate<br>give location of tanks   |         | Unit Letter  | Section  | Township                         |
|  |         | A  | 34   | 27 N                             |
|  |         |  |  | 26 N                             |
|  |         |  |  | 6 W                              |
|  |         |  |  | 6 W                              |
| Authorized transporter of oil <input type="checkbox"/> or condensate <input checked="" type="checkbox"/><br><b>ROXANA PIPELINE CORPORATION</b><br><b>CHANGED TO SHELL OIL COMPANY</b><br><b>EFFECTIVE MARCH 9, 1964</b>  |         | Address (give address to which approved copy of this form is to be sent)<br>P. O. Box 1588, Farmington, New Mexico   |  |                                  |
| Is Gas Actually Connected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>   |         |  |  |                                  |
| Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input checked="" type="checkbox"/>  |         | Date Connected   | Address (give address to which approved copy of this form is to be sent) |                                  |
| Southern Union Gas Company   |         | 5-27-59  | 1104 Burt Building, Dallas 1, 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 ..... <input type="checkbox"/> Change in Ownership ..... <input type="checkbox"/><br>Change in Transporter (check one)      Other (explain below)<br>Oil ..... <input type="checkbox"/> Dry Gas ..... <input type="checkbox"/><br>Casing head gas . <input type="checkbox"/> Condensate.. <input checked="" type="checkbox"/> |         |  |  |                                  |
| Remarks  |         |  |  |                                  |
| RECEIVED<br>MAR 30 1964<br>OIL CON. COM.<br>DIST. 3  |         |  |  |                                  |
| The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.   |         |  |  |                                  |
| Executed this the <u>27th</u> day of <u>March</u> , 19 <u>64</u> .   |         |  |  |                                  |
| OIL CONSERVATION COMMISSION  |         | By <u>Frank Emery</u>  |  |                                  |
| Approved by<br><b>Original Signed Emery C. Arnold</b>  |         | Title <u>Superintendent</u>  |  |                                  |
| Title<br><b>Supervisor Dist. # 3</b>   |         | Company <b>Caulkins Oil Company</b>  |  |                                  |
| Date<br><b>MAR 30 1964</b>   |         | Address<br><b>P. O. Box 780, Farmington, New Mexico</b>  |  |                                  |