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| SANTA FE                  |     |
| FILE                      |     |
| U.S.G.S.                  |     |
| LAND OFFICE               |     |
| TRANSPORTER               | OIL |
|                           | 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<br><b>HUMBLE OIL &amp; REFINING COMPANY</b>   |                      |                            |  | Lease<br><b>NAVAJO TRIBE OF INDIANS</b>   |                           | Well No.<br><b>2</b> |  |
| Unit Letter<br><b>M</b>   | Section<br><b>26</b> | Township<br><b>29-N</b>    | Range<br><b>14-W</b>   |   | County<br><b>SAN JUAN</b> |                      |  |
| Pool<br><b>OJO GALLUP</b>   |                      |                            |  | Kind of Lease (State, Fed. Fee)<br><b>INDIAN</b>  |                           |                      |  |
| If well produces oil or condensate<br>give location of tanks  |                      | Unit Letter<br><b>0</b>    | Section<br><b>26</b>   | Township<br><b>29-N</b>   | Range<br><b>14-W</b>      |                      |  |
| Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/><br><b>McWOOD CORPORATION</b> |                      |                            |  | Address (give address to which approved copy of this form is to be sent)<br><b>BOX 1702, FARMINGTON, NEW MEXICO</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"/>                                |                      | Date Connected<br><b>-</b> | Address (give address to which approved copy of this form is to be sent)<br><b>-</b> |   |                           |                      |  |

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

Gas flared at present, no gas connection available.

**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 ..... ☐

Remarks



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

Executed this the 26th day of SEPTEMBER, 19 60.

**OIL CONSERVATION COMMISSION**

Approved by

Title

Date

By

Title

Company

Address

**AGENT**  
**HUMBLE OIL & REFINING COMPANY**  
**BOX 2347, HOBBS, NEW MEXICO**

[illegible]