NEW MEXICO OIL CONSERVATION COMMISSION SANTA FE, NEW MEXICO

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Authorized Transporter of Oil or Condensate El Paso Natural Gas Products Co. Address (Give address to which approved copy of this form is to be sent) Authorized Transporter of Gas (Give address to which approved copy of this form is to be sent) (Give address to which approved copy of this form is to be sent) (Give address to which approved copy of this form is to be sent) (Give address to which approved copy of this form is to be sent) (Give address to which approved copy of this form is to be sent) (Give address to which approved copy of this form is to be sent) (Give address to which approved to provide this form is to be sent) (Give address to which approved to provide this form is to be sent) (Give address to which approved to provide this form is to be sent) (Give address to which approved to provide this form is to be sent) (Give address to which approved to provide this form is to be sent) (Give address to which approved to provide this form is to be sent) (Give address to which approved this form is to be sent) (Give address to which approved to provide this form is to be sent) (Give address to which approved to provide this form is to be sent) (Give address to which approved to provide this form is to be sent) (Give address to which approved to provide this form is to be sent) (Give address to which approved to provide this form is to be sent) (Give address to which approved to provide this form is to be sent) (Give address to which approved to provide this form is to be sent) (Give address to which approved to provide this form is to be sent) (Give address to which approved to provide this form is to be sent) (Give address to which approved to provide this form is to be sent) (Give address to be sent) (Give approved to provide this form is to be sent) (Give approved to provide this form is to be sent) (Give approved to provide this form is to be sent) (Give approved to provide this form is to be sent) (Give approved to provide this form is to be sent) (Give approved to	Company o	or Operat	or El P	aso Natural	Gas Compa	ny	Lease_Herri	n
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Authorized Transporter of Oil or Condensate El Paso Matural Gas Products Co. Address (Give address to which approved copy of this form is to be sent) Authorized Transporter of Gas El Paso Matural Gas Co. Address Box 997, Farmington, New Mexico (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 Reasons for Filing: (Please check proper box) Change in Transporter of (Check One): Oil () Dry Gas () C'head () ondensat Change in Ownership () Other (Give explanation below) On 5-16-56 pulled 1" tubing. Water fraced Pictured Cliff from 2266' to 2304' with 32,759 gallons water & 40,000# sand. EDP 1500#, max. pr. 1500#, avg. tr. pr. 1000#. Injection rate 47.5 EPM. Flush 5200 gallons. On 5-29-56 reran tubing. On 5-29-56 reran tubing. MOST Plush 5200 gallons On 5-29-56 reran tubing. MOST Plush 5200 gallons Figure 2 day of the Cil Conservation Commission have been conflict with. Executed this the 12 day of the Cil Conservation Commission have been conflict with. District Conservation Commission OIL CONSERVATION COMMISSION CompanyEl Paso Matural Gas Co.	County	San Juan	L	Kind of	Lease (S	tate, Fed.	or Patented)	Federal
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