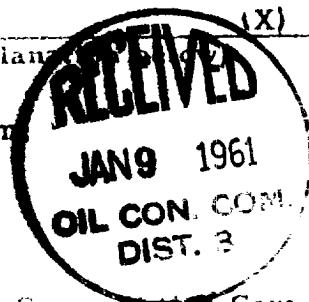


(File in original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Company or Operator El Paso Natural Gas Products Company Lease Horseshoe Ute
Well No. 9 Unit Letter K S 34 T 31N R 16W Pool Horseshoe Gallup
County San Juan Kind of Lease (State, Fed. or Patented) Federal - Indian
If well produces oil or condensate, give location of tanks Unit E S 34 T 31N R 16W
Authorized Transporter of Oil or Condensate El Paso Products Pipeline Company
Address Post Office Box 1560, Farmington, New Mexico
(Give address to which approved copy of this form is to be sent)
Authorized Transporter of Gas Horseshoe Gallup Gasoline Corporation
Address Post Office Box 1168, Graham, Texas Date Connected 1-5-61
(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) New Well ()
Change in Transporter of (Check One): Oil () Dry Gas () G'head () Condensate ()
Change in Ownership () Other (X)
Remarks: (Give explanation) First gas production into low pressure gathering system



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

Executed this the 6th day of January 19 61

Approved JAN 9 1961 19

OIL CONSERVATION COMMISSION

By Original Signed Emory C. Arnold

Title Supervisor Dist. # 3

By ORIGINAL SIGNED BY: JOHN J. STROJEK
John J. Strojek
Title Petroleum Engineer

Company El Paso Natural Gas Products Co

Address Post Office Box 1560

Farmington, New Mexico

[illegible]

NUMBER OF COPIES RECEIVED		6	
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	GAS		
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OPERATOR		2	

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO
CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

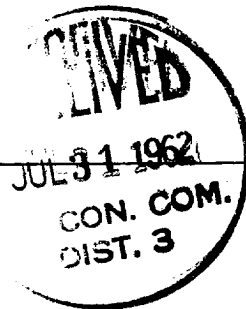
FORM C-110
 (Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator				Lease		Well No. 202	
Unit Letter K	Section 34	Township 13N	Range 1W	County Santa Fe			
Pool 1000-5000-1000				Kind of Lease (State, Fed, Fee) State			
If well produces oil or condensate give location of tanks			Unit Letter	Section	Township	Range	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>				Address (give address to which approved copy of this form is to be sent)			
Is Gas Actually Connected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>							
Authorized transporter of casing head gas <input checked="" 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:							

REASON(S) FOR FILING (please check proper box)

New Well ☐ Change in Ownership ☒
 Change in Transporter (check one)
 Oil ☐ Dry Gas ☐
 Casing head gas . ☐ Condensate.. ☐
 Other (explain below)



Remarks Provision well confirmation

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

Executed this the 1 day of Aug, 19 62

OIL CONSERVATION COMMISSION

Approved by

A. R. Gendrick

Title

PETROLEUM ENGINEER DIST. NO. 3

Date

JUL 31 1962

Title

Albert B. Ben

Company

Address