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A.S.G.S.	
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: **Amerada Pet. Corp.** Lease: **W.P. Byrd Gas Unit** Well No. **1**

Unit Letter: **F** Section: **12** Township: **20-S** Range: **36-E** County: **Lea**

Pool: **Eumont** Kind of Lease (State, Fed, Fee): **Fee**

If well produces oil or condensate give location of tanks: _____

Authorized transporter of oil or condensate Address (give address to which approved copy of this form is to be sent): _____

Is Gas Actually Connected? Yes No

Authorized transporter of casing head gas or dry gas Date Connected: _____ Address (give address to which approved copy of this form is to be sent): **Hobbs, New Mexico**

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) Other (explain below) _____
 Oil Dry Gas
 Casing head gas Condensate

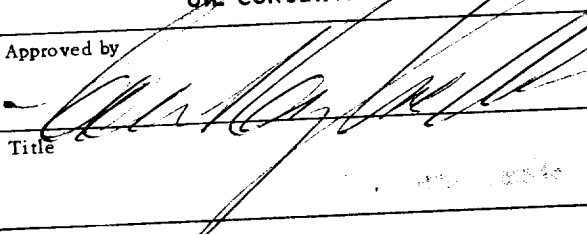

Change in name of transporter

**NAME CHANGE
AMERADA PETROLEUM CORP.
TO AMERADA HESS CORP.
EFFECTIVE JULY 1, 1969**

Remarks

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

Executed this the **30th** day of **January**, 19**61**.

<p>Approved by: </p> <p>Title: _____</p> <p>Date: _____</p>	<p>By: </p> <p>Title: Asst. Dist. Supt.</p> <p>Company: Amerada Pet. Corp.</p> <p>Address: Monument, N.M.</p>
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