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| 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 DRINKARD OIL COMPANY | | | Lease Leaves | Well No. 6 |
| Unit Letter A | Section 10 | Township 22S | Range 37E | County San Juan |

| | |
|--|---|
| Pool Drinkard | Kind of Lease (State, Fed, Fee) Fee |
| If well produces oil or condensate give location of tanks | Unit Letter H |
| | Section 10 |
| | Township 22S |
| | Range 37E |

| | |
|---|--|
| Authorized transporter of oil <input type="checkbox"/> or condensate <input type="checkbox"/> | Address (give address to which approved copy of this form is to be sent) |
| DRINKARD OIL COMPANY | 1000 W. 10th St., Santa Fe, N.M. |

Is Gas Actually Connected? Yes No

| | | |
|--|----------------|--|
| Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/> | Date Connected | Address (give address to which approved copy of this form is to be sent) |
| DRINKARD OIL COMPANY | | 1000 W. 10th St., Santa Fe, N.M. |

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

Remarks

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

Executed this the _____ day of _____, 19____

| | |
|---|--|
| <p style="text-align: center;">OIL CONSERVATION COMMISSION</p> <p>Approved by _____</p> <p>Title _____</p> <p>Date _____</p> | <p>By _____</p> <p>Title _____</p> <p>Company _____</p> <p>Address _____</p> |
|---|--|