

|                           |     |
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| SANTA FE                  |     |
| FILE                      |     |
| U.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<br><b>Union Texas Petroleum Corporation</b> |                     |                         |                      | Lease<br><b>Langlie</b> | Well No.<br><b>1</b> |
| Unit Letter<br><b>P</b>   | Section<br><b>8</b> | Township<br><b>25-S</b> | Range<br><b>37-E</b> | County<br><b>Lea</b>    |                      |

|  |   |
|--|---|
| Pool<br><b>Langlie-Mattix (Langlie Unit)</b> | Kind of Lease (State, Fed, Fee)<br><b>Federal</b> |
|--|---|

|  |                         |                     |                         |                      |
|--|-------------------------|---------------------|-------------------------|----------------------|
| If well produces oil or condensate<br>give location of tanks | Unit Letter<br><b>P</b> | Section<br><b>8</b> | Township<br><b>25-S</b> | Range<br><b>37-E</b> |
|--|-------------------------|---------------------|-------------------------|----------------------|

|  |  |
|--|--|
| 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) |
| <b>Shell Pipe Line Co.</b>   | <b>Box 1910 - Midland, Texas</b>   |

Is Gas Actually Connected? Yes  No

|   |                |  |
|---|----------------|--|
| 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) |
| <b>El Paso Natural Gas Co.</b>  |                | <b>Box 1384 - Jal, New Mexico</b>  |

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 .....

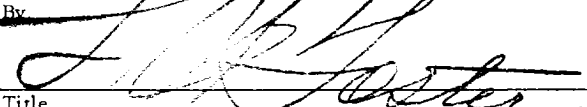
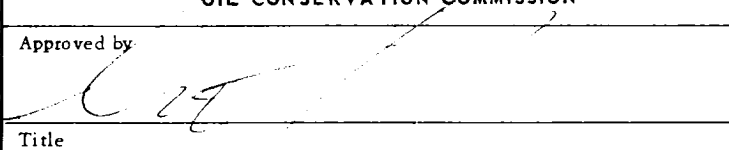
Casing head gas .       Condensate . .

Remarks

**Changed from Union Texas Natural Gas Corporation effective 11/22/62**

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

Executed this the **1st** day of **March**, 19**62**.

|   |  |  |
|---|--|--|
| <b>OIL CONSERVATION COMMISSION</b>  |  | By:  |
| Approved by:  |  | Title<br><b>District Superintendent</b>  |
| Title   |  | Company<br><b>Union Texas Petroleum Corporation</b>                                      |
| Date  |  | Address<br><b>Box 196 - Midland, Texas</b>   |