

| | | | |
|---------------------------|-----|---|--|
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| DISTRIBUTION | | | |
| 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 Harlan Production Company | | | | Lease Miller Federal | | Well No. 1 | |
| Unit Letter G | Section 5 | Township 18 | Range 29 | | County Eddy | | |

| | | | | | | | |
|--------------------------------------------------------------|--|--|--|---------------------------------------------------|---------------------|-----------------------|--------------------|
| Pool Loco Hills | | | | Kind of Lease (State, Fed, Fee) Federal | | | |
| If well produces oil or condensate give location of tanks | | | | Unit Letter G | Section 5 | Township 18 | Range 29 |

| | | | | | | | |
|-----------------------------------------------------------------------------------------------|--|--|--|--------------------------------------------------------------------------|--|--|--|
| 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) | | | |
| Texas New Mexico Pipeline Company | | | | P.O. Box 3119, Midland, Texas | | | |

| | | | | | | | |
|--------------------------------------------------------------------------------------------------------|--|--|--|----------------|--|--------------------------------------------------------------------------|--|
| Is Gas Actually Connected? Yes _____ No <input checked="" type="checkbox"/> _____ | | | | | | | |
| 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) | |
| None | | | | | | | |

If gas is not being sold, give reasons and also explain its present disposition:

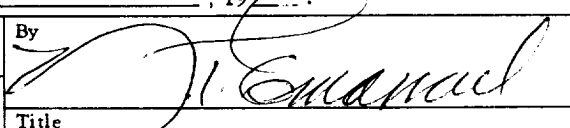
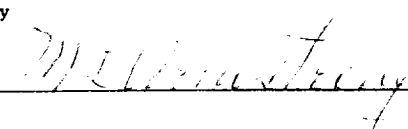
Gas is now vented. Will connect to Valley Gas Company or Phillips in near future.

| | |
|----------------------------------------------------------------------------------|----------------------------------------------------|
| REASON(S) FOR FILING (please check proper box) | |
| New Well <input type="checkbox"/> | Change in Ownership <input type="checkbox"/> |
| Change in Transporter (check one) | Other (explain below) |
| Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> | |
| Casing head gas . <input type="checkbox"/> Condensate.. <input type="checkbox"/> | |

RECEIVED
MAR 12 1964
O. C. C.
ARTESIA, OFFICE

Remarks

To report disposition of gas.

| | |
|----------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with. | |
| Executed this the <u>10th</u> day of <u>March</u> , 19 <u>64</u> . | |
| OIL CONSERVATION COMMISSION | By  |
| Approved by  | Title Petroleum Engineer |
| Title OIL AND GAS INSPECTOR | Company Harlan Production Company |
| Date MAR 12 1964 | Address P.O. Box 355, Monahans, Texas |