

<div>NUMBER OF COPIES RECEIVED</div> <div>DISTRIBUTION</div> <table><tr><td>SANTA FE</td><td></td><td></td></tr><tr><td>FILE</td><td></td><td></td></tr><tr><td>U.S.G.S.</td><td></td><td></td></tr><tr><td>LAND OFFICE</td><td></td><td></td></tr><tr><td>TRANSPORTER</td><td>OIL</td><td></td></tr><tr><td></td><td>GAS</td><td></td></tr><tr><td>PRORATION OFFICE</td><td></td><td></td></tr><tr><td>OPERATOR</td><td></td><td></td></tr></table>		SANTA FE			FILE			U.S.G.S.			LAND OFFICE			TRANSPORTER	OIL			GAS		PRORATION OFFICE			OPERATOR			<div>NEW MEXICO OIL CONSERVATION COMMISSION</div> <div>SANTA FE, NEW MEXICO</div> <div>CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS</div>			<div>FORM C-110</div> <div>(Rev. 7-60)</div> <div>B.1.</div>	
SANTA FE																														
FILE																														
U.S.G.S.																														
LAND OFFICE																														
TRANSPORTER	OIL																													
	GAS																													
PRORATION OFFICE																														
OPERATOR																														
FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE																														
Company or Operator <b>Continental Oil Company</b>				Lease <b>Jicarilla 20</b>		Well No. <b>2</b>																								
Unit Letter <b>M</b>		Section <b>20</b>		Township <b>25N</b>		Range <b>1W</b>																								
				County <b>Rio Arriba</b>																										
Pool <b>Gallup</b>				Kind of Lease (State, Fed, Fee) <b>Federal</b>																										
If well produces oil or condensate give location of tanks				Unit Letter <b>M</b>		Section <b>20</b>																								
				Township <b>25N</b>		Range <b>1W</b>																								
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>McWood Corporation</b>				Address (give address to which approved copy of this form is to be sent) <b>364 Petroleum Building, Abilene, Texas</b>																										
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"/> <b>El Paso Natural Gas Company</b>				Date Connected <b>5-21-62</b>		Address (give address to which approved copy of this form is to be sent) <b>P. O. Box 990, Farmington, New Mexico</b>																								
If gas is not being sold, give reasons and also explain its present disposition:																														
<div>REASON(S) FOR FILING (please check proper box)</div> <div><div>New Well <input type="checkbox"/></div><div>Change in Transporter (check one)<div><div>Oil <input type="checkbox"/></div><div>Dry Gas <input type="checkbox"/></div><div>Casing head gas <input type="checkbox"/></div><div>Condensate <input type="checkbox"/></div></div></div><div>Change in Ownership <input type="checkbox"/></div><div>Other (explain below)<div><b>Name change.</b></div></div></div> <div><b>Pipeline Connection for Casinghead Gas</b></div> <div><b>NMOCC-Artec (5) HDH ABC</b></div>																														
<div>RECEIVED</div> <div>MAY 22 1962</div> <div>OIL CON. COM.</div> <div>DIST. 3</div>																														
Remarks																														
The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.																														
Executed this the <b>21st</b> day of <b>May</b> , 19 <b>62</b> .																														
OIL CONSERVATION COMMISSION				By <b>ORIGINAL SIGNED BY</b> <b>R. E. JENSEN</b>																										
Approved by <b>Original Signed by W. B. Smith</b>				Title <b>Assistant District Superintendent</b>																										
Title <b>DEPUTY OIL &amp; GAS INSPECTOR DIST. NO. 3</b>				Company <b>Continental Oil Company</b>																										
Date <b>MAY 22 1962</b>				Address <b>P. O. Box 3312, Durango, Colorado</b>																										