


<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="text-align: center;">NUMBER OF COPIES RECEIVED</td></tr> <tr><td style="text-align: center;">DISTRIBUTION</td></tr> <tr><td>SANTA FE</td></tr> <tr><td>FILE</td></tr> <tr><td>U.S.G.S.</td></tr> <tr><td>LAND OFFICE</td></tr> <tr> <td>TRANSPORTER</td> <td>OIL</td> </tr> <tr> <td></td> <td>GAS</td> </tr> <tr><td>PRODUCTION OFFICE</td></tr> <tr><td>OPERATOR</td></tr> </table>	NUMBER OF COPIES RECEIVED	DISTRIBUTION	SANTA FE	FILE	U.S.G.S.	LAND OFFICE	TRANSPORTER	OIL		GAS	PRODUCTION OFFICE	OPERATOR	<p>NEW MEXICO OIL CONSERVATION COMMISSION SANTA FE, NEW MEXICO</p> <p><b>CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS</b></p> <p>FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE</p>	<p><b>FORM C-110</b> (Rev. 7-60)</p>
NUMBER OF COPIES RECEIVED														
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TRANSPORTER	OIL													
	GAS													
PRODUCTION OFFICE														
OPERATOR														
<p>Company or Operator: <b>El Paso Natural Gas Company</b></p>														
<p>Unit Letter: <b>M</b></p>		<p>Lease: <b>San Juan 28-6 Unit</b></p>												
<p>Section: <b>25</b></p>	<p>Township: <b>27-N</b></p>	<p>Well No.: <b>70 (1M)</b></p>												
<p>Range: <b>6-W</b></p>		<p>County: <b>Rio Arriba</b></p>												
<p>Pool: <b>So. Blanco Pictured Cliffs</b></p>		<p>Kind of Lease (State, Fed, Fee): <b>Federal</b></p>												
<p>If well produces oil or condensate give location of tanks</p>	<p>Unit Letter: <b>Same</b></p>	<p>Section: _____</p>												
<p>Township: _____</p>		<p>Range: _____</p>												
<p>Authorized transporter of oil <input type="checkbox"/> or condensate <input checked="" type="checkbox"/></p>		<p>Address (give address to which approved copy of this form is to be sent)</p>												
<p><b>El Paso Natural Gas Company</b></p>		<p><b>Box 990, Farmington, New Mexico</b></p>												
<p>Is Gas Actually Connected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p>														
<p>Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input checked="" type="checkbox"/></p>		<p>Address (give address to which approved copy of this form is to be sent)</p>												
<p><b>El Paso Natural Gas Company</b></p>		<p><b>Box 990, Farmington, New Mexico</b></p>												
<p>Date Connected: <b>12-15-57</b></p>														
<p>If gas is not being sold, give reasons and also explain its present disposition:</p>														
<p style="text-align: center;"><b>REASON(S) FOR FILING (please check proper box)</b></p>														
<p>             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 checked="" type="checkbox"/> </p>														
<p>Remarks</p>														
<p>The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.</p>														
<p>Executed this the <u>1st</u> day of <u>January</u>, 19 <u>63</u>.</p>														
<p>OIL CONSERVATION COMMISSION</p>		<p>By </p>												
<p>Approved by</p>		<p>Title: <b>Petroleum Engineer</b></p>												
<p><b>Original Signed Emery C. Arnold</b></p>		<p>Company: <b>El Paso Natural Gas Company</b></p>												
<p>Title: <b>Superintendent # 8</b></p>		<p>Address: <b>Box 990, Farmington, New Mexico</b></p>												
<p>Date: <b>APR 17 1963</b></p>														