

| NUMBER OF COPIES RECEIVED<br>DISTRIBUTION   |     | NEW MEXICO OIL CONSERVATION COMMISSION<br>SANTA FE, NEW MEXICO |  |  |      | FORM C-110<br>(Rev. 7-60)  |  |          |  |  |             |  |  |             |     |  |  |     |  |                   |  |  |          |  |  |   |  |  |  |  |  |
|---|-----|--|--|--|------|--|--|----------|--|--|-------------|--|--|-------------|-----|--|--|-----|--|-------------------|--|--|----------|--|--|---|--|--|--|--|--|
| <table border="1"><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>PRODUCTION 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 |  | PRODUCTION OFFICE |  |  | OPERATOR |  |  | <b>CERTIFICATE OF COMPLIANCE AND AUTHORIZATION<br/>TO TRANSPORT OIL AND NATURAL GAS</b> |  |  |  |  |  |
| SANTA FE  |     |  |  |  |      |  |  |          |  |  |             |  |  |             |     |  |  |     |  |                   |  |  |          |  |  |   |  |  |  |  |  |
| FILE  |     |  |  |  |      |  |  |          |  |  |             |  |  |             |     |  |  |     |  |                   |  |  |          |  |  |   |  |  |  |  |  |
| U.S.G.S.  |     |  |  |  |      |  |  |          |  |  |             |  |  |             |     |  |  |     |  |                   |  |  |          |  |  |   |  |  |  |  |  |
| LAND OFFICE   |     |  |  |  |      |  |  |          |  |  |             |  |  |             |     |  |  |     |  |                   |  |  |          |  |  |   |  |  |  |  |  |
| TRANSPORTER   | OIL |  |  |  |      |  |  |          |  |  |             |  |  |             |     |  |  |     |  |                   |  |  |          |  |  |   |  |  |  |  |  |
|   | GAS |  |  |  |      |  |  |          |  |  |             |  |  |             |     |  |  |     |  |                   |  |  |          |  |  |   |  |  |  |  |  |
| PRODUCTION OFFICE   |     |  |  |  |      |  |  |          |  |  |             |  |  |             |     |  |  |     |  |                   |  |  |          |  |  |   |  |  |  |  |  |
| OPERATOR  |     |  |  |  |      |  |  |          |  |  |             |  |  |             |     |  |  |     |  |                   |  |  |          |  |  |   |  |  |  |  |  |
| FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE  |     |  |  |  |      |  |  |          |  |  |             |  |  |             |     |  |  |     |  |                   |  |  |          |  |  |   |  |  |  |  |  |
| Company or Operator<br><b>El Paso Natural Gas Company</b>   |     |  |  | Lease<br><b>Blanco Gas Unit</b>  |      | Well No.<br><b>4 (FM)</b>  |  |          |  |  |             |  |  |             |     |  |  |     |  |                   |  |  |          |  |  |   |  |  |  |  |  |
| Unit Letter<br><b>K</b>   |     | Section<br><b>36</b>   |  | Township<br><b>28-N</b>  |      | Range<br><b>8-W</b>  |  |          |  |  |             |  |  |             |     |  |  |     |  |                   |  |  |          |  |  |   |  |  |  |  |  |
| Pool<br><b>Blanco</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>K</b>  |      | Section<br><b>36</b>   |  |          |  |  |             |  |  |             |     |  |  |     |  |                   |  |  |          |  |  |   |  |  |  |  |  |
|   |     |  |  | Township<br><b>28-N</b>  |      | Range<br><b>8-W</b>  |  |          |  |  |             |  |  |             |     |  |  |     |  |                   |  |  |          |  |  |   |  |  |  |  |  |
| Authorized transporter of oil <input type="checkbox"/> or condensate <input checked="" type="checkbox"/>  |     |  |  | Address (give address to which approved copy of this form is to be sent) |      |  |  |          |  |  |             |  |  |             |     |  |  |     |  |                   |  |  |          |  |  |   |  |  |  |  |  |
| <b>El Paso Natural Gas Company</b>  |     |  |  | <b>Box 990, Farmington, New Mexico</b>                                   |      |  |  |          |  |  |             |  |  |             |     |  |  |     |  |                   |  |  |          |  |  |   |  |  |  |  |  |
| Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>  |     |  |  |  |      |  |  |          |  |  |             |  |  |             |     |  |  |     |  |                   |  |  |          |  |  |   |  |  |  |  |  |
| Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input checked="" type="checkbox"/>   |     |  |  | Date Connected   |      | Address (give address to which approved copy of this form is to be sent) |  |          |  |  |             |  |  |             |     |  |  |     |  |                   |  |  |          |  |  |   |  |  |  |  |  |
| <b>El Paso Natural Gas Company</b>  |     |  |  |  |      | <b>Box 990, Farmington, 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 <input checked="" 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"/>  |     |  |  |  |      |  |  |          |  |  |             |  |  |             |     |  |  |     |  |                   |  |  |          |  |  |   |  |  |  |  |  |
| Remarks   |     |  |  |  |      |  |  |          |  |  |             |  |  |             |     |  |  |     |  |                   |  |  |          |  |  |   |  |  |  |  |  |
| <div>RECEIVED<br/>FEB 20 1963<br/>OIL CON. COM.<br/>DIST. 3</div>   |     |  |  |  |      |  |  |          |  |  |             |  |  |             |     |  |  |     |  |                   |  |  |          |  |  |   |  |  |  |  |  |
| The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.  |     |  |  |  |      |  |  |          |  |  |             |  |  |             |     |  |  |     |  |                   |  |  |          |  |  |   |  |  |  |  |  |
| Executed this the <u>15</u> day of <u>February</u> , 19 <u>63</u> .   |     |  |  |  |      |  |  |          |  |  |             |  |  |             |     |  |  |     |  |                   |  |  |          |  |  |   |  |  |  |  |  |
| OIL CONSERVATION COMMISSION   |     |  |  | By   |      |  |  |          |  |  |             |  |  |             |     |  |  |     |  |                   |  |  |          |  |  |   |  |  |  |  |  |
| Approved by<br>Original Signed By<br><b>A. R. KENDRICK</b>  |     |  |  | <b>ORIGINAL SIGNED E. S. OBERLY</b>                                      |      |  |  |          |  |  |             |  |  |             |     |  |  |     |  |                   |  |  |          |  |  |   |  |  |  |  |  |
| Title<br><b>PETROLEUM ENGINEER DIST. NO. 3</b>  |     |  |  | Title<br><b>Petroleum Engineer</b>                                       |      |  |  |          |  |  |             |  |  |             |     |  |  |     |  |                   |  |  |          |  |  |   |  |  |  |  |  |
| Date<br><b>FEB 21 1963</b>  |     |  |  | Company<br><b>El Paso Natural Gas Company</b>                            |      |  |  |          |  |  |             |  |  |             |     |  |  |     |  |                   |  |  |          |  |  |   |  |  |  |  |  |
|   |     |  |  | Address<br><b>Box 990, Farmington, New Mexico</b>                        |      |  |  |          |  |  |             |  |  |             |     |  |  |     |  |                   |  |  |          |  |  |   |  |  |  |  |  |