


<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="font-size: small;">NUMBER OF COPIES RECEIVED</td><td style="text-align: center;">6</td></tr> <tr><td style="font-size: small;">DISTRIBUTION</td><td></td></tr> <tr><td style="font-size: small;">SANTA FE</td><td></td></tr> <tr><td style="font-size: small;">FILE</td><td></td></tr> <tr><td style="font-size: small;">U.S.G.S.</td><td></td></tr> <tr><td style="font-size: small;">LAND OFFICE</td><td></td></tr> <tr> <td style="font-size: small;">TRANSPORTER</td> <td style="font-size: small;">OIL GAS</td> </tr> <tr><td style="font-size: small;">PRORATION OFFICE</td><td></td></tr> <tr><td style="font-size: small;">OPERATOR</td><td></td></tr> </table>	NUMBER OF COPIES RECEIVED	6	DISTRIBUTION		SANTA FE		FILE		U.S.G.S.		LAND OFFICE		TRANSPORTER	OIL GAS	PRORATION OFFICE		OPERATOR		<p><b>NEW MEXICO OIL CONSERVATION COMMISSION</b>  <b>SANTA FE, NEW MEXICO</b></p> <p><b>CERTIFICATE OF COMPLIANCE AND AUTHORIZATION  TO TRANSPORT OIL AND NATURAL GAS</b></p>	<p><b>FORM C-110</b>  (Rev. 7-60)</p>
NUMBER OF COPIES RECEIVED	6																			
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FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE																				
Company or Operator <b>El Paso Natural Gas Company</b>		Lease <b>San Juan 29-5 Unit</b>																		
Unit Letter <b>L</b>	Section <b>15</b>	Township <b>29-N</b>																		
Range <b>5-W</b>	County <b>Rio Arriba</b>																			
Pool <b>Blanco Mesa Verde</b>		Kind of Lease (State, Fed, Fee) <b>Federal</b>																		
If well produces oil or condensate give location of tanks	Unit Letter <b>Same</b>	Section 																		
		Township 																		
		Range 																		
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 checked="" type="checkbox"/> No <input type="checkbox"/>																				
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <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>																		
If gas is not being sold, give reasons and also explain its present disposition:																				
<b>REASON(S) FOR FILING</b> (please check proper box)																				
New Well ..... <input type="checkbox"/>																				
Change in Ownership ..... <input type="checkbox"/>																				
Change in Transporter (check one)																				
Oil ..... <input type="checkbox"/> Dry Gas .... <input type="checkbox"/>																				
Casing head gas . <input type="checkbox"/> Condensate.. <input checked="" type="checkbox"/>																				
Other (explain below)																				
Remarks																				
The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.																				
Executed this the <u>1st</u> day of <u>January</u> , 19 <u>63</u> .																				
OIL CONSERVATION COMMISSION		By																		
Approved by																				
<b>Original Signed Emery C. Arnold</b>		Title <b>Petroleum Engineer</b>																		
Title <b>Supervisor Dist. # 3</b>		Company <b>El Paso Natural Gas Company</b>																		
Date <b>APR 24 1963</b>		Address <b>Box 990, Farmington, New Mexico</b>																		

