

NUMBER OF COPIES RECEIVED DISTRIBUTION		NEW MEXICO OIL CONSERVATION COMMISSION SANTA FE, NEW MEXICO			FORM C-110 (Rev. 7-60)	
SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER OIL GAS PRORATION OFFICE OPERATOR		CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE						
Company or Operator <div style="text-align: center;">Emby Kaye</div>			Lease <div style="text-align: center;">PanAm Federal</div>		Well No. <div style="text-align: center;">1</div>	
Unit Letter <div style="text-align: center;">NE SW</div>	Section <div style="text-align: center;">19</div>	Township <div style="text-align: center;">30 North</div>	Range <div style="text-align: center;">15 West</div>	County <div style="text-align: center;">San Juan</div>		
Pool <div style="text-align: center;">Horseshoe Gallup</div>				Kind of Lease (State, Fed, Fee) <div style="text-align: center;">Federal</div>		
If well produces oil or condensate give location of tanks		Unit Letter <div style="text-align: center;">NE SW</div>	Section <div style="text-align: center;">27</div>	Township <div style="text-align: center;">30 North</div>	Range <div style="text-align: center;">15 West</div>	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <div style="text-align: center;"> El Paso Natural Gas Products Company <i>Shell oil co</i> </div>			Address (give address to which approved copy of this form is to be sent) <div style="text-align: center;"> Box 1161 El Paso, Texas </div>			
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)			
If gas is not being sold, give reasons and also explain its present disposition:						
REASON(S) FOR FILING (please check proper box)						
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> New Well <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 type="checkbox"/> </div> <div style="width: 45%;"> Change in Ownership <input type="checkbox"/> Other (explain below) <div style="text-align: center; font-weight: bold; margin-top: 10px;"> Change in operator </div> </div> </div>						
Remarks						
RECEIVED MAY 28 1962 OIL CON. COM.						
The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.						
Executed this the 22 day of May , 19 62						
OIL CONSERVATION COMMISSION			By			
Approved by			<div style="text-align: center;"> Operator </div>			
Title <div style="text-align: center;"> Original Signed by W. B. Smith DEPUTY OIL & GAS INSPECTOR DIST. NO. 3 </div>			Company <div style="text-align: center;">Emby Kaye</div>			
Date <div style="text-align: center;"> MAY 28 1962 </div>			Address <div style="text-align: center;"> 815 First National Building Tulsa 3, Oklahoma </div>			