

<div style="border: 1px solid black; padding: 2px;">NUMBER OF COPIES RECEIVED DISTRIBUTION</div> <table border="1" style="width:100%; border-collapse: collapse;"><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 style="border: 1px solid black; padding: 5px; margin: 5px 0;"><b>CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS</b></div> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE</div>		<div>FORM C-110</div> <div>(Rev. 7-60)</div>
SANTA FE																												
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LAND OFFICE																												
TRANSPORTER	OIL																											
	GAS																											
PRORATION OFFICE																												
OPERATOR																												
Company or Operator		Lease	Well No. <b>24</b>																									
Unit Letter <b>D</b>	Section <b>29</b>	Township <b>31N</b>	Range <b>16W</b>																									
Pool		Kind of Lease (State, Fed, Fee) <b>Fed</b>																										
If well produces oil or condensate give location of tanks		Unit Letter	Section																									
		Township	Range																									
Authorized transporter of oil <input type="checkbox"/> or condensate <input type="checkbox"/>		Address (give address to which approved copy of this form is to be sent)																										
Is Gas Actually Connected? Yes _____ No _____																												
Authorized transporter of casing head gas <input checked="" 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)																												
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 type="checkbox"/>																												
<div>"Effective May 3, 1966, The Atlantic Refining Company changed its name to Atlantic Richfield Company"</div>																												
Remarks <div style="text-align: center;"><b>The Atlantic Refining Co.</b> <b>Navajo</b> <b>24</b></div>																												
The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.																												
Executed this the <u>1</u> day of <u>Aug</u> , 19 <u>62</u>																												
OIL CONSERVATION COMMISSION		By																										
Approved by		Title																										
Original Signed <b>Emery C. Arnold</b>		[Signature]																										
Title		Company																										
Supervisor Dist. # 3		The Atlantic Refining Company																										
Date		Address																										
JUL 31 1962																												

