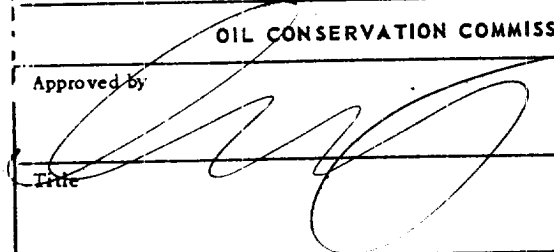
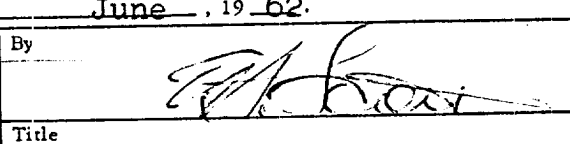


<div>NUMBER OF COPIES RECEIVED DISTRIBUTION</div> <table><tr><td>SANTA FE</td><td></td><td></td></tr><tr><td>FILE</td><td></td><td></td></tr><tr><td>USGS</td><td></td><td></td></tr><tr><td>LAND OFFICE</td><td></td><td></td></tr><tr><td>TRANSPORTER</td><td>OIL</td><td></td></tr><tr><td></td><td>GAS</td><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			USGS			LAND OFFICE			TRANSPORTER	OIL			GAS		PRODUCTION OFFICE			OPERATOR			NEW MEXICO OIL CONSERVATION COMMISSION SANTA FE, NEW MEXICO CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		FORM C-110 (Rev. 7-60)	
SANTA FE																													
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	GAS																												
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OPERATOR																													
FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE																													
Company or Operator TEXACO Inc.			Lease **Northeast 11 PH Well No. #1321 Caprock (Queen) Unit																										
Unit Letter L	Section 21	Township 12S	Range 32E	County Lea																									
Pool Caprock Queen			Kind of Lease (State, Fed, Fee) Patented																										
If well produces oil or condensate give location of tanks		Unit Letter L	Section 21	Township 12S	Range 32E																								
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> The Permian Corporation			Address (give address to which approved copy of this form is to be sent) Box 4157 - Midland, Texas																										
Is Gas Actually Connected? Yes _____ No <u>X</u>																													
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/> None		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: Casinghead gas flared due to lack of market.																													
REASON(S) FOR FILING (please check proper box) <table><tr><td>New Well <input type="checkbox"/></td><td>Change in Ownership <input type="checkbox"/></td></tr><tr><td>Change in Transporter (check one)</td><td>Other (explain below)</td></tr><tr><td>Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/></td><td></td></tr><tr><td>Casing head gas . <input type="checkbox"/> Condensate.. <input type="checkbox"/></td><td></td></tr></table>						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"/>																	
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Casing head gas . <input type="checkbox"/> Condensate.. <input type="checkbox"/>																													
Remarks *To change well no. from #1 to #1321. **To change lease name from Douthitt Estate to Northeast Caprock (Queen) Unit.																													
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>June</u> , 19 <u>62</u> .																													
Approved by 			By 																										
Title			Title District Accountant																										
Date			Company TEXACO Inc.																										
			Address P. O. Box 728 - Hobbs, New Mexico																										