


<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 style="width:50%;">SANTA FE</td><td style="width:50%;"></td></tr><tr><td>FILE</td><td></td></tr><tr><td>U.S.G.S.</td><td></td></tr><tr><td>LAND OFFICE</td><td></td></tr><tr><td>TRANSPORTER</td><td>OIL</td></tr><tr><td></td><td>GAS</td></tr><tr><td>PRODUCTION OFFICE</td><td></td></tr><tr><td>OPERATOR</td><td></td></tr></table>		SANTA FE		FILE		U.S.G.S.		LAND OFFICE		TRANSPORTER	OIL		GAS	PRODUCTION OFFICE		OPERATOR		<div style="border: 1px solid black; padding: 5px;">NEW MEXICO OIL CONSERVATION COMMISSION SANTA FE, NEW MEXICO</div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS</div> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE.</div>		<div style="border: 1px solid black; padding: 2px;">FORM C-110 (Rev. 7-60)</div>
SANTA FE																				
FILE																				
U.S.G.S.																				
LAND OFFICE																				
TRANSPORTER	OIL																			
	GAS																			
PRODUCTION OFFICE																				
OPERATOR																				
Company or Operator Phillips Petroleum Company		Lease Kennedy State	Well No. 1																	
Unit Letter J	Section 2	Township 17S	Range 32E	County Lea																
Pool Maljamar		Kind of Lease (State, Fed, Fee) State																		
If well produces oil or condensate give location of tanks		Unit Letter I	Section 2	Township 17S	Range 32E															
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> Texas-New Mexico Pipeline Company		Address (give address to which approved copy of this form is to be sent) Box 1510 - Midland, Texas																		
Is Gas Actually Connected? Yes _____ No <input checked="" type="checkbox"/>																				
Authorized transporter of casing head gas <input checked="" type="checkbox"/> or dry gas <input type="checkbox"/> Phillips Petroleum Company		Date Connected	Address (give address to which approved copy of this form is to be sent) Box 758 - Hobbs, New Mexico																	
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 checked="" 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"/>																				
(Refer to Administrative Order OLS-11) (and NMOC Order R-2484)																				
Remarks Formerly Kennedy Oil Company Kennedy State No. 1 EFFECTIVE: May 1, 1963																				
The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.																				
Executed this the <u>21</u> day of <u>May</u> , 19 <u>63</u> .																				
OIL CONSERVATION COMMISSION		By																		
Approved by																				
Title		Title Area Chief Clerk																		
Date		Company Phillips Petroleum Company																		
		Address Box 2105 - Hobbs, New Mexico																		