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| 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)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

| | | |
|---|-----------------------|------------------------|
| Company or Operator Continental Oil Company | Unit Unit 2 | Well No. 111 |
|---|-----------------------|------------------------|

| | | | | |
|-------------------------|----------------------|------------------------|---------------------|----------------------|
| Unit Letter B | Section 29 | Township 17S | Range 32E | County Dea |
|-------------------------|----------------------|------------------------|---------------------|----------------------|

| | |
|-------------------------|---|
| Pool Maljamar | Kind of Lease (State, Fed, Fee) Federal |
|-------------------------|---|

| | | | | |
|--|---------------------------|----------------------|------------------------|---------------------|
| If well produces oil or condensate give location of tanks | Unit Letter B-G | Section 29 | Township 17S | Range 32E |
|--|---------------------------|----------------------|------------------------|---------------------|

| | |
|---|---|
| Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> Texas-New Mexico Pipe Line 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 ☐

| | | |
|--|-----------------------------|---|
| Authorized transporter of casing head gas <input checked="" type="checkbox"/> or dry gas <input type="checkbox"/> Continental Oil Company Maljamar Gasoline Plant No. 60 | Date Connected NA | Address (give address to which approved copy of this form is to be sent) Box 460, Hobbs, New Mexico |
|--|-----------------------------|---|

If gas is not being sold, give reasons and also explain its present disposition:

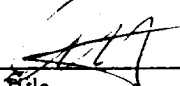
REASON(S) FOR FILING (please check proper box)

- | | |
|--|---|
| 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"/> | To record Continental as gas transporter |
| Casing head gas <input type="checkbox"/> Condensate <input type="checkbox"/> | |

Remarks

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the **30th** day of **December**, 19 **63**

| | |
|---|--|
| OIL CONSERVATION COMMISSION | By |
| Approved by  | Assistant District Manager |
| Title | Company Continental Oil Company |
| Date | Address Box 460, Hobbs, New Mexico |