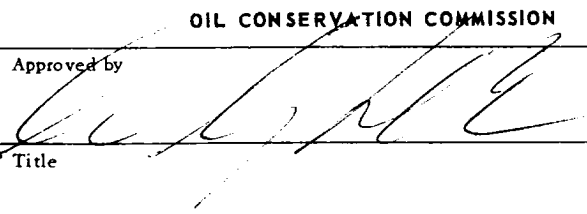


<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td colspan="2">NUMBER OF COPIES RECEIVED</td></tr> <tr><td colspan="2">DISTRIBUTION</td></tr> <tr><td>SANTA FE</td><td></td></tr> <tr><td>FILE</td><td></td></tr> <tr><td>U.S.G.S.</td><td></td></tr> <tr><td>LAND OFFICE</td><td></td></tr> <tr> <td>TRANSPORTER</td> <td>OIL GAS</td> </tr> <tr><td>PRODUCTION OFFICE</td><td></td></tr> <tr><td>OPERATOR</td><td></td></tr> </table>	NUMBER OF COPIES RECEIVED		DISTRIBUTION		SANTA FE		FILE		U.S.G.S.		LAND OFFICE		TRANSPORTER	OIL GAS	PRODUCTION OFFICE		OPERATOR		<p>NEW MEXICO OIL CONSERVATION COMMISSION</p> <p>SANTA FE, NEW MEXICO</p> <p><b>CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS</b></p>	<p><b>FORM C-110</b></p> <p>(Rev. 7-60)</p>
NUMBER OF COPIES RECEIVED																				
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TRANSPORTER	OIL GAS																			
PRODUCTION OFFICE																				
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FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE																				
Company or Operator <b>Continental Oil Company</b>		Lease No. <b>10 21</b> <b>M. E. Baish B</b> Well No. <b>16</b>																		
Unit Letter <b>M</b>	Section <b>22</b>	Township <b>17-S</b>																		
Range <b>32-E</b>		County <b>Lea</b>																		
Pool <b>Maljamar</b>		Kind of Lease (State, Fed, Fee) <b>Federal</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 <b>X</b>																				
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:  <b>Gas injection input well</b>																				
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) <b>X</b> Oil ..... <input type="checkbox"/> Dry Gas ..... <input type="checkbox"/> Casing head gas ..... <input type="checkbox"/> Condensate ..... <input type="checkbox"/> <b>Change in Well Designation</b>																				
Remarks  <b>Permission is requested to change the name of the well at above location from M. E. Baish B No. IP 10 to M. E. Baish B No. 16.</b>  <b>Copies to: N.DCC-5 WAM SW File</b>																				
The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.																				
Executed this the <b>25</b> day of <b>September</b> , 19 <b>61</b> .																				
OIL CONSERVATION COMMISSION		By																		
Approved by		Title																		
		<b>District Superintendent</b>																		
Title		Company																		
		<b>Continental Oil Company</b>																		
Date		Address																		
		<b>Rowley Building, Artesia, New Mexico</b>																		