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| LAND OFFICE | |
| TRANSPORTER | OIL GAS |
| PERMITTING OFFICE | |
| OPERATOR | |

| | |
|---|----------------------------------|
| NEW MEXICO OIL CONSERVATION COM 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 John H. Trigg Company | | | | Lease Federal "T" | | Well No. 4-13 |
| Unit Letter M | Section 13 | Township 18-S | Range 33-E | County Lea | | |
| Pool EK Yates-Seven Rivers-Queen | | | | Kind of Lease (State, Fed, Fee) Federal | | |

| | | | | |
|--|-------------------------|----------------------|-------------------------|----------------------|
| If well produces oil or condensate give location of tanks | Unit Letter N | Section 13 | Township 18-S | Range 33-E |
|--|-------------------------|----------------------|-------------------------|----------------------|

| | |
|---|--|
| 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) |
| Texas New Mexico Pipeline Company | Midland, Texas |

Is Gas Actually Connected? Yes **XX** No _____

| | | |
|--|----------------|--|
| 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) |
| Phillips Petroleum Company | | Hobbs, New Mexico |

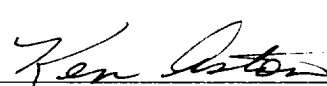
If gas is not being sold, give reasons and also explain its present disposition:

| | |
|---|--|
| REASON(S) FOR FILING (please check proper box) New Well <input type="checkbox"/> Change in Ownership <input 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"/> | |
| Change of Pool Designation | |

Remarks

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

Executed this the **17** day of **January**, 19 **64**.

| | | |
|-----------------------------|--|-------------------------|
| OIL CONSERVATION COMMISSION | | By |
| Approved by |  | |
| Title | | Production Clerk |
| Date | Company | |
| | John H. Trigg Company | |
| | Address | |
| | P. O. Box 106 - Maljamar, N. M. | |