LEASE & WELL	NUMBER_	Nellis	Federa	1 Well N	0.3			<del></del>
						6, T-19-S, R-33-E,	Lea	County

<u>Certification</u>: The following statement is to be incorporated in the plan and must be <u>signed</u> by the lessee's or operator's field representative who is identified in Item No. 12 of the plan.

I hereby certify that I, or persons under my direct supervision have inspected the proposed drillsite and access route; that I am familiar with the conditions which presently exist; that the statements made in this plan are, to the best of my knowledge, true and correct; and, that the work associated with the operations proposed herein will be performed by AMOCO PRODUCTION COMPANY and its contractors and subcontractors in comformity with this plan and the terms and conditions under which it is approved.

DATE

9-6-78

Sr. Drlg. Foreman

NAME AND TITLE