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**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<br><b>Socony Mobil Oil Company, Inc.</b> |                      |                        |                     | Lease<br>State <b>"K"</b> |  | Well No.<br><b>8</b> |
| Unit Letter<br><b>P</b>                                      | Section<br><b>31</b> | Township<br><b>17S</b> | Range<br><b>35E</b> | County<br><b>Lea</b>      |  |                      |

|  |  |                      |                        |                     |
|--|--|----------------------|------------------------|---------------------|
| Pool<br><b>Undesignated</b>                                  | Kind of Lease (State, Fed, Fee)<br>State |                      |                        |                     |
| If well produces oil or condensate<br>give location of tanks | Unit Letter<br><b>L</b>                  | Section<br><b>31</b> | Township<br><b>17S</b> | Range<br><b>35E</b> |

|   |   |
|---|---|
| Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/><br><br><b>Magnolia Pipe Line Company</b> | Address (give address to which approved copy of this form is to be sent)<br><br><b>P. O. Box 900, Dallas, Texas</b> |
|---|---|

**Is Gas Actually Connected? Yes \_\_\_\_\_ No \_\_\_\_\_**

|  |                                   |   |
|--|-----------------------------------|---|
| Authorized transporter of casing head gas <input checked="" type="checkbox"/> or dry gas <input type="checkbox"/><br><br><b>Sinclair Oil &amp; Gas Company</b> | Date Connected<br><b>12-18-64</b> | Address (give address to which approved copy of this form is to be sent)<br><br><b>520 East Broadway, Hobbs, New Mexico</b> |
|--|-----------------------------------|---|

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

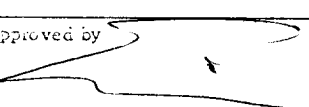
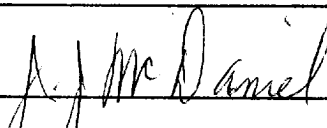
**REASON(S) FOR FILING (please check proper box)**

- |  |  |
|--|--|
| New Well ..... <input checked="" 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"/> |  |

|         |
|---------|
| Remarks |
|---------|

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

Executed this the 18th day of December, 1964.

|  |  |
|--|--|
| OIL CONSERVATION COMMISSION<br><br>Approved by <br><br>Title | By<br> |
|  | Title<br><b>Group Supervisor</b>   |
|  | Company<br><b>Socony Mobil Oil Company, Inc.</b>   |
|  | Address<br><b>Box 1800, Hobbs, New Mexico</b>  |