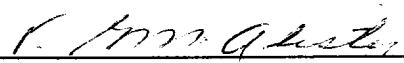


<div style="border: 1px solid black; padding: 2px;">NUMBER OF COPIES RECEIVED DISTRIBUTION</div> <table border="1" style="width:100%; border-collapse: collapse;"><tr><td style="width:50%;">SANTA FE</td><td style="width:50%;"></td></tr><tr><td>FILE</td><td></td></tr><tr><td>U.S.G.S.</td><td></td></tr><tr><td>LAND OFFICE</td><td></td></tr><tr><td>TRANSPORTER</td><td>OIL GAS</td></tr><tr><td>PRORATION OFFICE</td><td></td></tr><tr><td>OPERATOR</td><td></td></tr></table>		SANTA FE		FILE		U.S.G.S.		LAND OFFICE		TRANSPORTER	OIL GAS	PRORATION OFFICE		OPERATOR		<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">NEW MEXICO OIL CONSERVATION COMMISSION SANTA FE, NEW MEXICO</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS</div> <div style="border: 1px solid black; padding: 2px; font-size: small;">FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE</div>		<div style="border: 1px solid black; padding: 2px;">FORM C-110 (Rev. 7-60)</div>
SANTA FE																		
FILE																		
U.S.G.S.																		
LAND OFFICE																		
TRANSPORTER	OIL GAS																	
PRORATION OFFICE																		
OPERATOR																		
Company or Operator Continental Oil Company		Lease Reed "B"	Well No. 6															
Unit Letter 0	Section 23	Township 20S	Range 36E	County Lea														
Pool Summit		Kind of Lease (State, Fed, Fee) Federal																
If well produces oil or condensate give location of tanks		Unit Letter 1	Section 23	Township 20	Range 36													
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> Shell Pipe Line Corporation		Address (give address to which approved copy of this form is to be sent) Box 1910 - Midland, Texas																
Is Gas Actually Connected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>																		
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/> Phillips Petroleum Company		Date Connected -	Address (give address to which approved copy of this form is to be sent) Box 758 - 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)																		
Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Other (explain below)																		
Casing head gas . <input type="checkbox"/> Condensate.. <input type="checkbox"/> Change in lease and/or well designation																		
Remarks Formerly Reed B-2324 No. 6																		
The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.																		
Executed this the <u>9</u> day of <u>January</u> , 19 <u>62</u> .																		
OIL CONSERVATION COMMISSION		By																
Approved by																		
Title		Title District Superintendent																
Date		Company Continental Oil Company																
		Address Box 427 - Hobbs, New Mexico																