| 015            | TRIBUTION |   |
|----------------|-----------|---|
| SANTA FE       |           |   |
| FILE           |           | 1 |
| U. S. G. S.    | 1         |   |
| LAND OFFICE    |           |   |
| TRANSPORTER    | OIL       |   |
|                | GAS       |   |
| PRORATION OFFI | CE        |   |
| OPERATOR       |           |   |

## SANTA FE, NEW MEXICO SANTA FE, NEW MEXICO (Rev. 7-60)

## CERTIFICATE OF COMPLIANCE AND ANTHORIZATION TO TRANSPORT OIL AND MATURE

| TRANSPORTER GAS   |                  | TO                                       | TRANSPOR                 | T OIL AND  | NATURAL GAS                      |                                |  |  |  |
|---|------------------|--|--------------------------|--|----------------------------------|--------------------------------|--|--|--|
| OPERATOR  |                  | FILE THE O                               | RIGINAL AND 4 (          | OPIES WITH TH  | IE APPROPRIATE OFF               | ICE                            |  |  |  |
| Company or Operator                                       | orpore tion      |  |                          |  | Lease<br>G. C. Matthews          | Well No.                       |  |  |  |
| Unit Letter   | Section          | Township                                 | Range                    | 7 9  | County                           |                                |  |  |  |
| Pool  | 6                | v 20-S                                   |                          | 7-E  | Kind of Lease (State, Fed        | d,Fee)                         |  |  |  |
|   | Kernun           | ent Blinebry                             | T                        |  | Fee                              |                                |  |  |  |
| If well produces oil or condensate give location of tanks |                  |  | Section                  | Township 20-3  | Range 37-B                       |                                |  |  |  |
| Authorized transporter of oil or condensate               |                  |  |                          | Address (give address to which approved copy of this form is to be sent) |                                  |                                |  |  |  |
| Gulf Refining Co.   |                  |  | Box 1150, Midland, Texas |  |                                  |                                |  |  |  |
|   |                  | Is Gas Ac                                | tually Connecte          | d? Yes IX  | _ No                             |                                |  |  |  |
| Authorized transporte                                     | r of casing head | gas or dry gas                           | Date Con-<br>nected      | Address (give ad   | dress to which approved co       | py of this form is to be sent) |  |  |  |
| Warren Fet Corp.  |                  |  |                          |  | Box 67, Monument, New Mexico     |                                |  |  |  |
| If gas is not being so                                    | ld, give reasons | and also explain its                     | present disposition:     |  |                                  |                                |  |  |  |
| To shew t   | Change in Ti     | ransporter (check one Dry ead gas . Cond | e)<br>Gas                | Change in Own  | ership                           |                                |  |  |  |
| Remarks   |                  |  | <del>,</del>             |  |                                  |                                |  |  |  |
| e undersigned ce  | rtifies that the | Rules and Regula                         | tions of the Oil C       | onservation Comp   | nission have been compl          | ied with.                      |  |  |  |
|   | Executed         | this the 3rd                             | _ day of                 | ary  | , 19 <u>_<b>6</b>l</u> 4.        |                                |  |  |  |
|   | L CONSERVA       | TION COMMISSION                          |                          | By   | OR GINAL SIGNED<br>C. D. BORLAND | HY                             |  |  |  |
| to vest by  |                  |  | _                        | Title Area Production Manager  |                                  |                                |  |  |  |
| ,   | or a respect to  | J  |                          | Company  | 0                                |                                |  |  |  |
| i de la   | े शिलनते         | <i>y</i>                                 |                          | Address  | il Corperation                   |                                |  |  |  |
| <b>d</b> ir   |                  |  |                          |  | O, Hobbs, New Me                 | xioo                           |  |  |  |