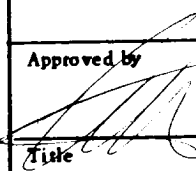
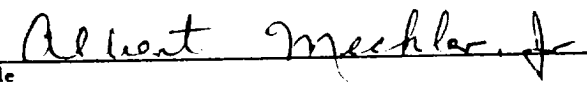


NUMBER OF COPIES RECEIVED _____ DISTRIBUTION SANTA FE _____ FILE _____ U.S.A. _____ LAND OFFICE _____ TRANSPORTER OIL _____ GAS _____ PRODUCTION OFFICE _____ OPERATOR _____		<b>NEW MEXICO OIL CONSERVATION COMMISSION</b> SANTA FE, NEW MEXICO <b>CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS</b>		<b>FORM C-110</b> (Rev. 7-60)
FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE				
Company or Operator <b>Marathon Oil Company</b>			Lease <b>Lea Unit</b>	Well No. <b>11</b>
Unit Letter <b>N</b>	Section <b>13</b>	Township <b>20-S</b>	Range <b>34-E</b>	County <b>Lea</b>
Pool <b>Lea Penn</b>			Kind of Lease (State, Fed, Fee) <b>Federal</b>	
If well produces oil or condensate give location of tanks		Unit Letter <b>L</b>	Section <b>12</b>	Township <b>20-S</b>
				Range <b>34-E</b>
Authorized transporter of oil <input type="checkbox"/> or condensate <input checked="" type="checkbox"/>			Address (give address to which approved copy of this form is to be sent)	
<b>Famariss Oil &amp; Refining Company</b>			<b>Box 2497 - Hobbs, New Mexico</b>	
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 checked="" type="checkbox"/>		Date Connected	Address (give address to which approved copy of this form is to be sent)	
<b>Marathon Oil Company</b>		<b>11-20-63</b>	<b>Box 220 - Hobbs, New Mexico</b>	
If gas is not being sold, give reasons and also explain its present disposition:				
<b>REASON(S) FOR FILING (please check proper box)</b>				
New Well ..... <input checked="" type="checkbox"/>				
Change in Ownership ..... <input type="checkbox"/>				
Change in Transporter (check one)				
Oil ..... <input type="checkbox"/> Dry Gas ..... <input type="checkbox"/>				
Casing head gas . <input type="checkbox"/> Condensate . <input type="checkbox"/>				
Other (explain below)				
Remarks <b>Did not obtain point alignment from Back Pressure Test. Well will be retested. Absolute open flow based on a Back Pressure Curve slope of 1.00.</b>				
The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.				
Executed this the <u>10</u> day of <u>December</u> , 19 <u>63</u>				
OIL CONSERVATION COMMISSION			By	
Approved by 				
Title			Title <b>Asst. Supt.</b>	
Date			Company <b>Marathon Oil Company</b>	
			Address <b>Box 220 - Hobbs, New Mexico</b>	