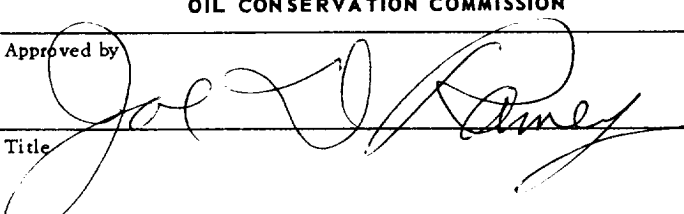


<div>NUMBER OF COPIES RECEIVED</div> <div>DISTRIBUTION</div> <table><tr><td>SANTA FE</td><td></td><td></td></tr><tr><td>FILE</td><td></td><td></td></tr><tr><td>U.S.G.S.</td><td></td><td></td></tr><tr><td>LAND OFFICE</td><td></td><td></td></tr><tr><td>TRANSPORTER</td><td>OIL</td><td></td></tr><tr><td></td><td>GAS</td><td></td></tr><tr><td>PRORATION OFFICE</td><td></td><td></td></tr><tr><td>OPERATOR</td><td></td><td></td></tr></table>		SANTA FE			FILE			U.S.G.S.			LAND OFFICE			TRANSPORTER	OIL			GAS		PRORATION OFFICE			OPERATOR			<div>NEW MEXICO OIL CONSERVATION COMMISSION</div> <div>SANTA FE, NEW MEXICO</div> <div>CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS</div> <div>FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE</div>		<div>FORM C-110</div> <div>(Rev. 7-60)</div>	
SANTA FE																													
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OPERATOR																													
Company or Operator Amerada Petroleum Corporation			Lease State D"B"		Well No. 2																								
Unit Letter E	Section 32	Township 21	Range 37-E		County Lea																								
Pool Drinkard			Kind of Lease (State, Fed, Fee) State																										
If well produces oil or condensate give location of tanks		Unit Letter E	Section 32	Township 21	Range 37-E																								
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> Shell Pipe Line Co.			Address (give address to which approved copy of this form is to be sent) Oil Accounting Section, Box 2648, Houston, Texas																										
Is Gas Actually Connected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>																													
Authorized transporter of casing head gas <input checked="" type="checkbox"/> or dry gas <input type="checkbox"/> Skelly Oil Co.		Date Con- nected	Address (give address to which approved copy of this form is to be sent) Box 1135, Eunice, N.M.																										
If gas is not being sold, give reasons and also explain its present disposition:																													
<div>REASON(S) FOR FILING (please check proper box)</div> <div><div>New Well <input type="checkbox"/></div><div>Change in Transporter (check one)<div><div>Oil <input type="checkbox"/></div><div>Dry Gas <input type="checkbox"/></div><div>Casing head gas <input type="checkbox"/></div><div>Condensate <input type="checkbox"/></div></div></div><div>Change in Ownership <input type="checkbox"/></div><div>Other (explain below)</div></div>																													
Remarks																													
The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.																													
Executed this the <u>23rd</u> day of <u>January</u> , 19 <u>64</u> .																													
OIL CONSERVATION COMMISSION			By																										
Approved by 			Title Asst. Dist. Supt.																										
Title			Company Amerada Pet. Corp.																										
Date			Address Box 706, Eunice, N.M.																										