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|  |   |                 |                               |                |
| FILE<br>U.S.G.S.   | SANTA FE, NEW MEXICO (Rev. 7-60)            |                 |                               |                |
| LAND OFFICE  | CERTIFICATE OF COMPLIANCE AND AUTHORIZATION |                 |                               |                |
| TRANSPORTER OIL GAS TO TRANSPORT OIL AND NATURAL GAS   |   |                 |                               |                |
| PROBATION OFFICE   |   |                 |                               | DVICI          |
| OPERATOR   | FILE THE ORIGINAL AND 4                     | COPIES WITH T   | HE APPROPRIATE OFFICE         |                |
| Company or Operator  |   | 12              | Lease                         | Well No.       |
|  |   |                 |                               | 12             |
| Gulf Oil Corporation   | m 11  | ,, ~~ <u>~</u>  | W. T. McCormack               | <b></b>        |
| Unit Letter Section  | Township Range                              |                 | County                        |                |
| B 32   | 21-5 31                                     | <u> -E   </u>   | los                           |                |
| Pool Blinebry  |   |                 | Kind of Lease (State, Fed, Fe | se)            |
|  | Unit Letter                                 | Section         | Township                      | Para           |
| If well produces oil or condensate Unit Letter<br>give location of tanks   |   | 32              | 21-S                          | Range          |
|  |   |                 |                               | 37-2           |
| Authorized transporter of oil III or condensate  |   |                 |                               |                |
|  |   |                 |                               |                |
| Cheral Diversion Communication Bon 1010 Midland Suma   |   |                 |                               |                |
| Shell Pipeline Corporation Box 1910, Midland, Texas  |   |                 |                               |                |
| Is Gas Actually Connected? Yes_XX_No   |   |                 |                               |                |
| Authorized transporter of casing head gas in or dry gas Date Con- Address (give address to which approved copy of this form is to be sent) |   |                 |                               |                |
| nected   |   |                 |                               |                |
| Narren Pet. Corp. Box 1197, Bunice, New Maxico   |   |                 |                               |                |
|  |   |                 |                               |                |
| If gas is not being sold, give reasons and also explain its present disposition:   |   |                 |                               |                |
|  |   |                 |                               |                |
|  |   |                 |                               |                |
|  |   |                 |                               |                |
|  |   |                 |                               |                |
|  |   |                 |                               |                |
|  | REASON(S) FOR FILING                        | (please check   | proper box)                   |                |
|  |   |                 |                               |                |
| New Well   |   |                 |                               |                |
| Change in Transporter (check one) Other (explain below)  |   |                 |                               |                |
| Oil Dry Gas  |   |                 |                               |                |
| Casing head gas . Condensate   |   |                 |                               |                |
|  |   |                 |                               |                |
|  |   |                 |                               |                |
|  |   |                 |                               |                |
|  |   |                 |                               |                |
|  |   |                 |                               |                |
|  |   |                 |                               |                |
| Remarks  |   |                 |                               |                |
|  |   |                 |                               |                |
|  |   |                 |                               |                |
| Mall has been abanded  |   |                 | - and the set and met         | at free beauty |
| Well has been standing. Installed pumping equipment, Ran GOR test and returned well to   |   |                 |                               |                |
| production.  |   |                 |                               |                |
|  |   |                 |                               |                |
| The undersigned certifies that the l   | Pulse and Reculations of the Oil C          | AB CATTER COT   | mission have been complied    | with.          |
| ine undersigned certifies that the   | Autes and Regulations of the off C          | 01301140101 001 |                               |                |
| Encourted  | this the 6th day of James                   | LTW .           | . 19 64                       |                |
| Executed   | unis the day of                             | By              | , 1/ <b></b>                  | ·····          |
| OIL CONSERVAT  | ION COMMISSION                              | by              |                               |                |
| Approved by  |   |                 |                               |                |
| Approved by  |   | Title           |                               |                |
| 1 th   |   |                 | And my Brainson               |                |
| CT   |   |                 | trolena Engineer              |                |
| Title  |   | Company         |                               |                |
|  |   |                 | 7 Company Advan               |                |
|  |   |                 | 1 Corporation                 |                |
| Date   | ·   | Address         |                               |                |
|  | 2.15  |                 |                               |                |
|  |   | Bar 670         | . Hobbs. New Maxie            |                |