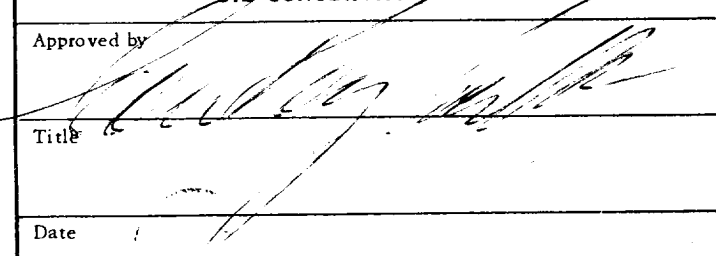


<div>NUMBER OF COPIES RECEIVED</div> <div>DISTRIBUTION</div> <table><tr><td>SANTA FE</td><td></td><td></td></tr><tr><td>FILE</td><td></td><td></td></tr><tr><td>U.S.G.S.</td><td></td><td></td></tr><tr><td>LAND OFFICE</td><td></td><td></td></tr><tr><td>TRANSPORTER</td><td>OIL</td><td></td></tr><tr><td></td><td>GAS</td><td></td></tr><tr><td>PRODUCTION 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		PRODUCTION OFFICE			OPERATOR			<div>NEW MEXICO OIL CONSERVATION COM SION</div> <div>SANTA FE, NEW MEXICO</div> <div>CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS</div>		<div>FORM C-110</div> <div>(Rev. 7-60)</div>	
SANTA FE																													
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	GAS																												
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OPERATOR																													
FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE																													
Company or Operator <b>Cities Service Petroleum Company</b>			Lease <b>Closson</b>		Well No. <b>3</b>																								
Unit Letter <b>G</b>	Section <b>6</b>	Township <b>22</b>	Range <b>36</b>	County <b>Lea</b>																									
Pool <b>Jalmat</b>				Kind of Lease (State, Fed, Fee) <b>Federal</b>																									
If well produces oil or condensate give location of tanks		Unit Letter <b>*</b>	Section <b>6</b>	Township <b>22</b>	Range <b>36</b>																								
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>Texas-New Mexico Pipeline Company</b>			Address (give address to which approved copy of this form is to be sent) <b>Box 1510, Midland, Texas</b>																										
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"/> <b>United Carbon Co., Inc.</b>		Date Connected <b>-</b>	Address (give address to which approved copy of this form is to be sent) <b>Eunice, New Mexico</b>																										
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>New Well ..... <input type="checkbox"/></div> <div>Change in Ownership ..... <input checked="" type="checkbox"/> <b>also,</b></div> <div>Change in Transporter (check one)</div> <div>Oil ..... <input type="checkbox"/> Dry Gas ..... <input type="checkbox"/></div> <div>Casing head gas . <input type="checkbox"/> Condensate . <input type="checkbox"/></div> <div>Other (explain below) <b>Change name of operator from Cities Service Oil Company to: Cities Service Petroleum Company.</b></div> <div>1-1-63</div>																													
Remarks  <b>* Tanks located on lease.</b>  <b>C-110 is to be effective 1-1-61</b>																													
The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.																													
Executed this the <b>28th</b> day of <b>December</b> , 19 <b>60</b> .																													
OIL CONSERVATION COMMISSION			By																										
Approved by 			<b>Fred Closson</b>																										
Title			Title <b>District Clerk</b>																										
Date			Company <b>Cities Service Petroleum Company</b>																										
			Address <b>Box 97 - Hobbs, New Mexico</b>																										