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| SANTA FE | |
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| U.S.G.S. | |
| LAND OFFICE | |
| TRANSPORTER | OIL |
| | GAS |
| PRODUCTION OFFICE | |
| OPERATOR | |

| | |
|---|----------------------------------|
| NEW MEXICO OIL CONSERVATION COM ION SANTA FE, NEW MEXICO CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS | FORM C-110 (Rev. 7-60) |
| May 5 10 23 AM '64 FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE | |

| | | | | | | | |
|--|----------------------|---------------------------------|----------------------|--|----------------------|----------------------|--|
| Company or Operator Continental Oil Company | | | | Lease State E | | Well No. 2 | |
| Unit Letter I | Section 17 | Township 22S | Range 36E | | County Lea | | |
| Pool South Eunice | | | | Kind of Lease (State, Fed, Fee) State | | | |
| If well produces oil or condensate give location of tanks | | Unit Letter 0 | Section 17 | Township 22S | Range 36E | | |
| Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> Texas-New Mexico Pipe Line Company | | | | Address (give address to which approved copy of this form is to be sent) Box 1510, Midland, 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"/> Phillips Petroleum Company | | Date Connected 6-1-62 | | Address (give address to which approved copy of this form is to be sent) Box 2105, Hobbs, New Mexico | | | |

If gas is not being sold, give reasons and also explain its present disposition:

REASON(S) FOR FILING (please check proper box)

| | |
|--|--|
| New Well <input type="checkbox"/> | Change in Ownership <input type="checkbox"/> |
| Change in Transporter (check one) | Other (explain below) X |
| Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> | |
| Casing head gas . <input type="checkbox"/> Condensate . . <input type="checkbox"/> | Change in well designation. |

NMOCC (5) ABS

Remarks SW

This well was formerly the State E-17 No. 2. It has been redesignated State E No. 2 effective 5-1-64.

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 30th day of April, 1964

| | | | |
|----------------------------------|--|--|--|
| OIL CONSERVATION COMMISSION | | By Signed: ROBERT GAULT III | |
| Approved by | | Title Staff Supervisor | |
| Title Staff Supervisor | | Company Continental Oil Company | |
| Date 4-30-64 | | Address Box 460, Hobbs, New Mexico | |