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NEW MEXICO OIL CONSERVATION COM. SION SANTA FE, NEW MEXICO <b>CERTIFICATE OF COMPLIANCE AND AUTHORIZATION          TO TRANSPORT OIL AND NATURAL GAS</b> APR 7 10 47 AM '64	<b>FORM C-110</b> (Rev. 7-60) O.C.C.
FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE	

Company or Operator <b>Phillips Petroleum Company</b>				Lease <b>Yates "A"</b>		Well No. <b>2</b>	
Unit Letter <b>K</b>	Section <b>29</b>	Township <b>21S</b>	Range <b>35E</b>	County <b>Lea</b>			
Pool <b>North San Simon - Yates</b>				Kind of Lease (State, Fed, Fee) <b>State</b>			
If well produces oil or condensate give location of tanks		Unit Letter <b>0</b>	Section <b>29</b>	Township <b>21S</b>	Range <b>35E</b>		
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>The Permian Corporation</b>				Address (give address to which approved copy of this form is to be sent) <b>Box 3119 - 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>Phillips Petroleum Company</b>		Date Connected <b>7-27-60</b>	Address (give address to which approved copy of this form is to be sent) <b>Phillips Bldg; - Room B-2 Odessa, Texas</b>				

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

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

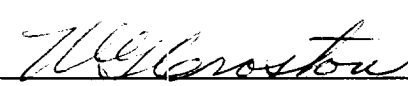
New Well ..... ☐      Change in Ownership ..... ☐  
 Change in Transporter (check one)      Other (explain below) ..... ☐  
 Oil ..... ☒      Dry Gas ..... ☐  
 Casing head gas . ☐      Condensate.. ☐

**Eff. 4-7-64**

Remarks

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

Executed this the **6** day of **April**, 19 **64**.

OIL CONSERVATION COMMISSION		By
Approved by		Title
Title		<b>Office Manager</b>
Date	Company <b>Phillips Petroleum Co.</b>	
	Address <b>Box 2130 - Hobbs, N.M.</b>	