

|                     |     |
|---------------------|-----|
| LAND OFFICE         | OIL |
| TRANSPORTER         | GAS |
| REGISTRATION OFFICE |     |
| OPERATOR            |     |

NEW MEXICO OIL CONSERVATION COM SION  
SANTA FE, NEW MEXICO  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS**

FORM C-110  
(Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

|   |                     |                           |   |   |                      |                      |  |
|---|---------------------|---------------------------|---|---|----------------------|----------------------|--|
| Company or Operator<br><b>HUMBLE OIL &amp; REFINING COMPANY</b>   |                     |                           |   | Lease<br><b>S</b><br>New Mexico State <del>nm</del>   |                      | Well No.<br><b>1</b> |  |
| Unit Letter<br><b>"I"</b>   | Section<br><b>2</b> | Township<br><b>T-22-S</b> | Range<br><b>R-37-E</b>  | County<br><b>Lea</b>  |                      |                      |  |
| Pool<br><b>Paddock</b>  |                     |                           |   | Kind of Lease (State, Fed, Fee)<br><b>State</b>   |                      |                      |  |
| If well produces oil or condensate<br>give location of tanks  |                     | Unit Letter<br><b>H</b>   | Section<br><b>2</b>   | Township<br><b>22-S</b>   | Range<br><b>37-E</b> |                      |  |
| Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/><br><b>Texas New Mexico Pipe Line Company</b> |                     |                           |   | Address (give address to which approved copy of this form is to be sent)<br><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"/>                                     |                     | Date Con-<br>nected       | Address (give address to which approved copy of this form is to be sent)<br><b>Box 1135, Eunice, New Mexico</b> |   |                      |                      |  |
| <b>Skelly Oil Company</b>   |                     |                           |   |   |                      |                      |  |

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

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

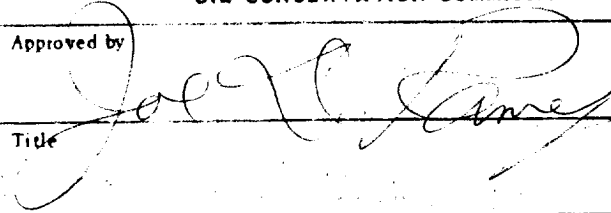

New Well ..... ☐ Change in Ownership ..... ☐  
Change in Transporter (check one) Other (explain below)  
Oil ..... ☐ Dry Gas ..... ☐  
Casing head gas . ☐ Condensate . . ☐

In compliance with NMOCC Memo 3-63 of 11-1-63.

Remarks

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

Executed this the 26th day of December, 19 63.

|                             |  |  |
|-----------------------------|--|--|
| OIL CONSERVATION COMMISSION |  | By   |
| Approved by                 |  |                  |
| Title                       |  | Title<br><b>Agent</b>  |
| Date                        |  | Company<br><b>HUMBLE OIL &amp; REFINING COMPANY</b><br>Address<br><b>Box 2100, Hobbs, New Mexico</b> |