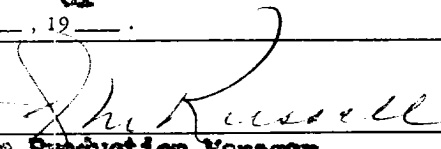



|  |                      |  |                         |  |                                  |                      |
|--|----------------------|--|-------------------------|--|----------------------------------|----------------------|
| NUMBER OF COPIES RECEIVED<br>DISTRIBUTION<br>SANTA FE<br>FILE<br>U.S.G.S.<br>LAND OFFICE<br>TRANSPORTER<br>OIL<br>GAS<br>PRORATION OFFICE<br>OPERATOR                              |                      | NEW MEXICO OIL CONSERVATION COMMISSION<br>SANTA FE, NEW MEXICO<br><b>CERTIFICATE OF COMPLIANCE AND AUTHORIZATION<br/>         TO TRANSPORT OIL AND NATURAL GAS</b> |                         |  | <b>FORM C-110</b><br>(Rev. 7-60) |                      |
| FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE   |                      |  |                         |  |                                  |                      |
| Company <b>Gulf Oil Corporation</b>  |                      |  |                         | Lease <b>P. J. Dangle</b>  |                                  | Well No. <b>1</b>    |
| Unit Letter<br><b>M</b>  | Section<br><b>13</b> | Township<br><b>22-S</b>  | Range<br><b>37-E</b>    |  | County <b>Lea</b>                |                      |
| Pool<br><b>Tabb</b>  |                      |  |                         | Kind of Lease (State, Fed, Fee)<br><b>Fee</b>  |                                  |                      |
| If well produces oil or condensate<br>give location of tanks   |                      |  | Unit Letter<br><b>M</b> | Section<br><b>13</b>   | Township<br><b>22-S</b>          | Range<br><b>37-E</b> |
| Authorized transporter of oil <input type="checkbox"/> or condensate <input checked="" type="checkbox"/><br><b>Gulf Refining Co.</b>   |                      |  |                         | Address (give address to which approved copy of this form is to be sent)<br><b>Box 1508, Hobbs, N. M.</b>            |                                  |                      |
| Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>   |                      |  |                         |  |                                  |                      |
| Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/><br><b>Northern Natural Gas Company</b>                                      |                      |  |                         | Address (give address to which approved copy of this form is to be sent)<br><b>P. O. Box 2376, Hobbs, New Mexico</b> |                                  |                      |
| If gas is not being sold, give reasons and also explain its present disposition:   |                      |  |                         |  |                                  |                      |
| <b>REASON(S) FOR FILING (please check proper box)</b>  |                      |  |                         |  |                                  |                      |
| New Well <input type="checkbox"/> Change in Ownership <input checked="" type="checkbox"/> Other (explain below)  |                      |  |                         |  |                                  |                      |
| Change in Transporter (check one)<br>Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/><br>Casing head gas <input type="checkbox"/> Condensate <input type="checkbox"/> |                      |  |                         |  |                                  |                      |
| <b>To change name of gas transporter.</b>  |                      |  |                         |  |                                  |                      |
| Remarks  |                      |  |                         |  |                                  |                      |
| The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.   |                      |  |                         |  |                                  |                      |
| Executed this the <b>24th</b> day of <b>February</b> , 19 <b>61</b>  |                      |  |                         |  |                                  |                      |
| OIL CONSERVATION COMMISSION  |                      |  |                         | By                              |                                  |                      |
| Approved by    |                      |  |                         | Title <b>Area Production Manager</b>   |                                  |                      |
| Title  |                      |  |                         | Company <b>Gulf Oil Corporation</b>  |                                  |                      |
| Date   |                      |  |                         | Address <b>P. O. Box 2167, Hobbs, New Mexico</b>   |                                  |                      |