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| TRANSPORTER               | OIL<br>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)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

|   |                      |                         |                         |   |                         |                       |  |
|---|----------------------|-------------------------|-------------------------|---|-------------------------|-----------------------|--|
| Company or Operator<br><b>Gulf Oil Corporation</b>  |                      |                         |                         | Lease<br><b>C. E. LaMunyon</b>  |                         | Well No.<br><b>17</b> |  |
| Unit Letter<br><b>B</b>   | Section<br><b>29</b> | Township<br><b>23-S</b> | Range<br><b>37-E</b>    | County<br><b>Lea</b>  |                         |                       |  |
| Pool<br><b>Langlie Mattix</b>   |                      |                         |                         | Kind of Lease (State, Fed, Fee)<br><b>Federal</b>   |                         |                       |  |
| If well produces oil or condensate<br>give location of tanks  |                      |                         | Unit Letter<br><b>H</b> | Section<br><b>29</b>  | Township<br><b>23-S</b> | Range<br><b>37-E</b>  |  |
| Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/><br><b>Shell Pipeline Corporation</b>       |                      |                         |                         | Address (give address to which approved copy of this form is to be sent)<br><b>Box 1910 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"/><br><b>El Paso Natural Gas Co.</b> |                      |                         | Date Con-<br>nected     | Address (give address to which approved copy of this form is to be sent)<br><b>Box 1384 Jal, New Mexico</b> |                         |                       |  |

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

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

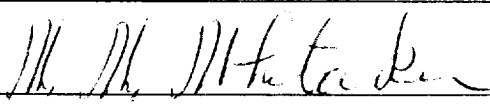

New Well ..... ☐ Change in Ownership ..... ☐  
 Change in Transporter (check one) Other (explain below)  
 Oil ..... ☒ Dry Gas .... ☐  
 Casing head gas . ☐ Condensate.. ☐

**Effective 12-16-64**

Remarks

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

Executed this the **7th** day of **December**, 19 **64**.

|                             |  |         |  |
|-----------------------------|--|---------|--|
| OIL CONSERVATION COMMISSION |  | By      |  |
| Approved by                 |  | Title   | <b>Area Engineer</b>   |
| Title                       |  | Company | <b>Gulf Oil Corporation</b>  |
| Date                        |  | Address | <b>Box 980 Kermit, Texas</b>   |