

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

NEW MEXICO OIL CONSERVATION COMMISSION  
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     |                     |                         |                      | Lease<br><b>Hodges B</b> |  | Well No.<br><b>1</b> |
| Unit Letter<br><b>M</b> | Section<br><b>1</b> | Township<br><b>25-S</b> | Range<br><b>37-E</b> | County<br><b>Lea</b>     |  |                      |

|                       |   |
|-----------------------|---|
| Pool<br><b>Justis</b> | Kind of Lease (State, Fed Fee)<br><b>Patented</b> |
|-----------------------|---|

|  |             |         |          |       |
|--|-------------|---------|----------|-------|
| If well produces oil or condensate<br>give location of tanks | Unit Letter | Section | Township | Range |
|--|-------------|---------|----------|-------|

|   |  |
|---|--|
| Authorized transporter of oil <input type="checkbox"/> or condensate <input type="checkbox"/> | Address (give address to which approved copy of this form is to be sent) |
|---|--|

Is Gas Actually Connected? Yes ☒ No ☐

|   |                |  |
|---|----------------|--|
| Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input checked="" type="checkbox"/> | Date Connected | Address (give address to which approved copy of this form is to be sent) |
|---|----------------|--|

**El Paso Natural Gas Company**

**Box 1492 - El Paseo, Texas**

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 . . ☐

Remarks

1-1-64

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

Executed this the \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_.

|                             |  |         |
|-----------------------------|--|---------|
| OIL CONSERVATION COMMISSION |  | By      |
| Approved by                 |  |         |
| Title                       |  |         |
|                             |  | Company |
| Date                        |  | Address |