NUMBER OF COPIES RECEIVED  OISTRIBUTION  SANTA FI  FILE  U.S.G.S.  LAND OFFICE  TRANSPORTER  GAS  PRORATION OFFICE			FICATE	SANT OF COM NSPOR	A FE, NEW MAPLIANCE	AND AUTHORIZ NATURA 12 25 A5	AS JAN '63
OPERATOR		FILE TH	E ORIGINAL	AND 4 CO	PIES WITH TH	E APPROPRIATE OF	FICE Well No.
Company or Operator	Ph177	ips Petrol	Compa	nv		Lease Sims	Well No.
Unit Letter	Section	Township	out output	Range		County	
E	24		<b>22</b> S		37E	Lea	
Pool <b>Drink</b>	e wi					Kind of Lease (State, F	Fed, Fee)
				tter <b>E</b>	Section 24	Township 22S	Range 37E
Authorized transporter of oil a or condensate					l	ldress to which approved	copy of this form is to be sent)
Texas-New Mex	ice Pip	e Line Com	pany	3	Box 15	10 - Midland, T	exas
		Is Ga	s Actually	Connected	Yes <u>▼</u>	_ No	
Authorized transporter of casing head gas or dry gas Date Connected  Address (give address to which approved copy of this form is to be sent							
Skelly Oil Company				<u>}</u>	Eunice, New Mexico		
Remarks	OIL COMPAN OIL COM New Well Change in Oil	Y MFRCID MPANY.	ck one)  Dry Gas	· 🗆	(please check p Change in Own Other (explain	ership below)	
	Execut	ne Rules and R ed this the ATION COMMIS	day of	None	By Title Area C	mission have been con	· ·
Date					Address Box 21	30 - Hobbs, N.	1.