NUMBER OF COPIES RECEIVED	CERTIFICATE	SANT	a fe, new m N pliance	ION CAISSION EXICO AND AUTHORIZA NATURAL GAS	TION	FORM C-110 (Rev. 7-60)
Company or Operator	FILE THE ORIGINAL	AND 4 CC	PIES WITH TH	E APPROPRIATE OFFIC Lease	<u>Е</u>	Well No.
THE	N. ALLISON	1		HONOLULU STATE "F	311	3
Unit Letter Section Township Range J 11 7-11-S R-27-E			- E,	County CHAVES		
Pool COYOTE QUEEN				Kind of Lease (State, Fed, Fee) STATE		
If well produces oil or condensate give location of tanks (?			Section 11	Township T-11-S		27 - E
Authorized transporter of oil 🥂 or co	ATION		FRED H. A P. O. DRA MIDLAND.	AWER 1828 TEXAS	y of this fo	rrm is to be sent)
	Is Gas Actually			<u>No X</u>		7)
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)						
New Well Change in Tr Oil Casing he CliAit	REASON(S) FO 	R FILING · □ · □ · □ · □ · □	Change in Own Other (explain i	ership		
The undersigned certifies that the	Rules and Regulations of	the Oil Co	nservation Com	mission have been compli	ed with.	
	this thellth day of		ULY	, 19 <u>62</u> .		
			By	Y D .07		
Approved by MLAriii Title	Trong		Company	ACER D M. ALLISON	72	·
Date JU	Address P. O. DRAWER 1828 HIDLAND, TEXAS					