NUMBER OF COPIES RECEIVED   DISTRIBUTION   SANTA FT   FILE   U.B.G.B.   LAND OFFICE   TRANSPORTER			E OF COMP	FE, NEW M	EXICO	FORM C-110 (Rev. 7-60)	
Company or Operator		FILE THE ORIGIN	NAL AND 4 COPI	<u>ES WITH TH</u>	NATURAL GAS	Well No.	
		Producing Company		i	Southern Minerals State 2-21		
Unit Letter	Section 21	Township	Range 33		County		
Pool					Kind of Lease (State, Fed, Fee)		
Under	ignat	the second s			State	Pages	
If well produces oil or condensate give location of tanks				Section	Township 9-8	Range <b>33-E</b>	
Authorized transporter of		orporation		P. O. Midle	dress to which approved copy Box 3119 and, Texas	of this form is to be sent)	
Authorized transporter of	casing head		ly Connected? Date Con- nected		No	of this form is to be sent)	
		• •	FOR FILING (pl	ease check p	proper box)		
	Change in ' Oil	Iran spottet (check one) Dry Gas . head gas . Condensa	🗆	Dange in Own	ership [		
Remarks							
The undersigned certi	ies that th	e Rules and Regulations	s of the Oil Cons	ervation Com	mission have been complie	d with.	
		ed this the <b>22nd</b> day			, 19 <b>64</b>		
OIL		ATION COMMISSION		y ()	All	$\overline{O}$	
Approved by	A	Atting		itle Company	Production Su	perintendent	
SUPERVISION DISTRICT 1.				Coastal States Gas Producing Company			
Date	JU	1 155		ddress	ox 385, Abilene	, Texas	

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