NUMBER OF COPIES RECEIVED DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER OIL GAS PRORATION OFFICE		CERTIFIC	SA ATE OF C	NTA FE,	NEW ME	ON _JMMISSION EXICO AND AUTHORIZATION NATURAL GAS		DRM C-110 (Rev. 7-60)	
Company or Operator		······		COPIES		E APPROPRIATE OFFICE Lease	•	Well No.	
	1	COMPANY, INC.				Russell		4	
Unit Letter Section Township Range 0 35 17S			27E	7E Eddy					
Pool					Kind of Lease (State, Fed, Fee)				
Red Lake						Federal			
If well produces oil or condensate give location of tanks					Section	Township	Range		
give location of tanks 0 Authorized transporter of oil X or condensate				Addres	35 s (give add	35 178 273 give address to which approved copy of this form is to be sent)			
Continental P:		ompany				Artesia, New M	lexico		
		Is Gas Act	ually Connec	ted? Yo	s	No _ x			
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) If gas is not being sold, give reasons and also explain its present disposition:									
Vented.									
		REASON	I(S) FOR FILI	NG (please	check pr	oper box)			
	New Well				Change in Ownership				
						int Account.			
Remarks						REGEIVED			
						SEP 2		3	
	· · · · · ·	D. L	in the Oil	<u></u>	ion Comm	ARTESI		CE	
The undersigned cert					ion comm	ission have been complied w			
		this the <u>20th</u>	. day of _Sept	By	1		<u></u>		
Approved by				Title	inter	t tostu			
11/4	Ann	xnong		Compa		um Engineer			
Title ONL AND GAS INSPECTOR					CARPER DRILLING COMPANY, INC.				
Date	SEP	2 7 19 63		Addres		a, New Mexico			