NUMBER OF COPIES RECEIVED DISTRIBUTION SANTA 51 FILE U.S.G.S LAND OFFICE TRANSPORTER GAS HIGRATION OFFICE	SAN CERTIFICATE OF CO	CONSERVATION CAMISSION TAFE, NEW MEXICO MPLIANCE AND AUTHORIZAT T OIL AND NATURAL GAS	FORM C-110 (Rev. 7-60)
Company or Operator	FILE THE ORIGINAL AND 4 C	OPIES WITH THE APPROPRIATE OFFICE	Well No.
		F. M. Robinson A	Unit II h
	OIL-CORPORATION Sec	County	
<u>G</u> <u>34</u>	173 2	Kind of Lease (State, Fed Fe	
Pool and the state of the second second		Kind of Lease (State, Fea, re	e) (
If well produces oil or conde	nsate Unit Letter	Section Township	Range
give location of tanks		34 178 398 Address (give address to which approved copy of this form is to be sent) It is to be sent)	
	Is Gas Actually Connecte	d? YesNo	
Authorized transporter of casing head gas or dry gas Date Con- nected		Address (give address to which approved copy of this form is to be sent)	
REASON(S) FOR FILING New Well Change in Transporter (check one) Oil Dry Gas C Casing head gas . Condensate		(please check proper box) Change in Ownership Other (explain below) RECEIVED JUL 1 2 1963 D. C. C. ARTESIA, OFFICE	
Remarks	nge to sens of subjects for the property of the later t		
The undersigned certifies that the F	Rules and Regulations of the Oil Co	onservation Commission have been complied	with.
	جنوب کار		
Executed	his the day of	, 19	
OIL CONSERVAT	ON COMMISSION		
Approved by	+	Title Company	
من معرين	H CAR INTERT		
Date Date	JUL 1 2 196 3	Address	an a
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