| NUMBER OF OPIES RECEI DISTRIBUTI SANTA FE FILE U.S.G.S LAND OFFICE TRANSPORTER OIL GAS PRORATION OFFICE OPERATOR | | CERTIF | FORM C-110 (Rev. 7-60) | | | | |
|--|--|-----------------------------|---------------------------------------|---|--|----------------------------------|--------------------|
| Company or Operat | tor | FILE THE | ORIGINAL AND 4 C | OPIES WITH TH | Lease | | Well No. |
| ···· | Continental | | | | | | 4 |
| Unit Letter P | 19 Section | Township 188 | Ranse | | County Eddy | | |
| Pool Artesia | | | | Kind of Lease (State, Fed, Fee) State - B-9222 | | | |
| If well produces oil or condensate Unit Letter give location of tanks | | | | Section | Township | Rang | e |
| Authorized transpo | orter of oil 🗌 or c | ondensate | | Address (give ad | dress to which approve | d copy of this f | orm is to be sent) |
| | | ls Gas | Actually Connecte | + | No | | |
| Authorized transpo | rter of casing head , | gas 🚺 or dry ga | IS Date Con- nected | Address (give ad | dress to which approve | d copy of this f | orm is to be sent) |
| | REASON(S) FOR FILING New Well Change in Transporter (check one) Oil Dry Gas Casing head gas . Condensate | | | | (please check proper box) Change in Ownership | | |
| | | | | | | 3. C . U. Isia, effici | |
| Remarks | | | · · · · · · · · · · · · · · · · · · · | | · · · · · · · · · · · · · · · · · · · | | |
| State "A" N | certifies that the | -61. This Rules and Regu | well will be 1 | etained as | Kelly et al in a temporarily | abandone | ly i well. |
| | | | h day of March | By | , 19 | | |
| Approved by | OIL CONSERVAT | TION COMMISSIO |)N | | ha- | 4 link | 1 |
| | <u>L'Arnai</u> | trong | | Title Dia Company | strict Superin | (====== | Z |
| | L AND GAS INSPI | | | | ntinental Oil | Company | |
| Date | MAR 2 2 19 | 60 | | Address | | | |