Unit Letter Section	CERTIFICAT TO T	SANT TE OF CO RANSPOR	TA FE, NEW M MPLIANCE T OIL AND	ION CISSION EXICO AND AUTHORIZ NATURAL GAS IE APPROPRIATE OFF Lease County County Kind of Lease (State, Fe	TICE Well 1	/_60)
If well produces oil or condensate Unit Letter			Section	Township	Range	
give location of tank	s		Address (give ad	dress to which approved co	opy of this form is to be	sent)
Authorized transporter of oil 🔄 or co	an bayang					
	Is Gas Actua	Ily Connecte Date Con-		_No	anu of this fame is to L	
Authorized transporter of casing head a	Address (give address to which approved copy of this form is to be sent) IN TLECYLLAR, URICINAL					
Change in Tr Oil	REASON(S) an sporter (check one) Dry Gas . ad gas . Condensa	🗆	(please check p Change in Own Other (explain	ership		.
10 Carse officients	13:20 J -190 J - N		12010-001	ilite R	ET LA LA LA LA	FICE
Remarks						
The undersigned certifies that the			onservation Com		olied with.	
		y of	By	, 19 	AL SIGNED B	Y
OIL CONSERVA	FION COMMISSION		Title	FOWLE	R HIX RAL MANAGER	<u> </u>
Title 91L ARD VAS /R8PE			Company	at oil tota ny		
Date JAN 6 1954			Address	94. <i>410</i> - 797 1.	L, Blank.	