NUMBER OF COPIES RECEIVED	CERTIFICATE	OF COMP	FE, NEW M		FORM C-110 (Rev. 7-60)	
OPERATOR	FILE THE ORIGINAL	AND 4 COP	IES WITH TH	E APPROPRIATE OFFICE		
Company or Operator	011 Graphicy			Lease WLAU	Well No. 39 - 1	
Unit Letter Section	Section Township ISS Range			County Real		
Pool Loca Hills	<u> </u>		Kind of Lease (State, Fed, Fee)			
If well produces oil or con give location of tan		tter	Section	Township Ran 285	^{se} 29 E	
Authorized transporter of oil Tor c	i.t.ne		Arts	dress to which approved copy of this	form is to be sent)	
Authorized transporter of casing head				No tress to which approved copy of this	form is to be sent)	
If gas is not being sold, give reasons	and also explain its present d	isposition:		RECEIV	<u>'ED</u>	
He gas is not being sold, give reasons				JUL - 3 19	063	
	REASON(S) FO					
Change in T Oil	ransporter (check one) Dry Gas ead gas. Condensate.	·	Other (explain b	rship		
Remarks Sampa of 2009 Tructo of 20080 : Touri JU, Roll 2	wher from Jourell was and call much	Drilling ar fran S	00. to 1 teto 16-2	emmont Cil Company. #1 to West Loco Hills	Unit,	
The undersigned certifies that the	lot.		ervation Comm	hission have been complied with.		
	this the day of	B	y affarra	ald N. Brit	Enc)	
Approved by ML anist	+	T	itle Proú z	otion Clark		
Title	INSPECTOE	c	ompany NGMA	nt 011 Company		
Date	: 1963	A	ddress Artes	ile, Ist Merico	<u></u>	