NUMBER OF COPIES FIECEIVED    DISTRIBUTION  Contraction    SANTA FI  /    FILE  /    U.S.G.S.	CERTIFICAT	san <sup>.</sup> E OF CO	TA FE, NEW M MPLIANCE	AND AUTHORIZA		<b>ORM C-110</b> (Rev. 7-60)
OPERATOR 2	FILE THE ORIGIN	AL AND 4 C	OPIES WITH TH	E APPROPRIATE OFFI	CE	Well No.
Company or Operator		VLGU 41 - 1				
Unit Letter Section	Township	Range	29 B	County Eddy		
Pool MATIS	I			Kind of Lease (State, Fed	Fee)	
If well produces oil or cond	lensate Unit	Letter	Section	Township 188	Range	29 B
give location of tanks			Address (give ad	dress to which approved cop	by of this form	- · ·
Authorized transporter of oil For c				and, Tems		
	ls Gas Actuall	y Connecte	d? Yes	No	<b></b>	
Authorized transporter of casing head	eas or dry gas	Date Con- nected		RECEIVE		is to be sent)
If gas is not being sold, give reasons	and also explain its presen	t disposition:	<u></u>	JUL 3 1963		
50 gas produced.			D. C. C. ARTESIA, OFFICE			
Casing h	Dry Gas ead gas Condensate	e 🗌	lng Co. sc l 2 State N-2	Formant Oil Compe #1 to West Loco	ny. Rille Uk	11.
The undersigned certifies that the		of the Oil C	onservation Com	nission have been compl	ied with.	
	TION COMMISSION		Ву?	1 4 M	13	
OIL CONSERVA Approved by			- 1/07	63	Ju	na
	Tyono		Title	odustica Clerk		
Title OR AND GAS IRSPECTOR			Company Establish Cil Company			
Date July_	1963		Address	teals, New Monto	0	