NAMER OF COPIES RECEIVED S DISTRIBUTION SANTA FE I PILE I U.S.G.S. LAND OFFICE OIL / TRANSPORTER OIL / GAS	CERTIFICAT	TE OF COM	A FE, NEW ME		REFORM C-110	
Company or Operator				E APPROPRIATE OFFICE Lease GULT FEBERAL	Well No.	
it Letter Section Township Range		Range	31-E County EDDY			
Pool	I 20 18-S			Kind of Lease (State, Fed, Fee)		
If well produces oil or condensate Unit Letter			Section	Township 18-6	Range 31-8	
give location of tanks Authorized transporter of oil i or condensate		O (Address (give add	lress to which approved copy		
				221 Borth Colorado Midland, Texas		
	ls Gas Actua			.No	(this form is to be sent)	
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)			
If gas is not being sold, give reasons	and also explain its pres	ent disposition:	<u> </u>		5.	
Change in ' Oil	REASON(S fransporter (check one) Dry Gas head gas . Condens	••••		ership [
Remarks TRANS POR	BFFEC	TIVE: JU	GY 1, 196			
The undersigned certifies that th	e Rules and Regulation	ns of the Oil Co	nservation Com	_	ed with.	
Execut	ed this the d	ay of	By A	, 19 _61 .		
	ATION COMMISSION			mel Ol	hers	
Approved by MLam	strong			IT OPERATOR		
Title OIL AND GAS (NS)		CIANDERS & FEMALEY				
Date JUN 26 1961 Address 607 MIBLAND NATIONAL BASK BLDG.						