NUMBER OF COPIES RECEIVED	<u> </u>		····				_ LP R	ECE	IVEB	
DISTRIBUTION		CERTIF	ICATE	SAN OF CC	NTA FE	, NEW M ANCE	ION LOMMISSION	JUN 2 ZATLON	FORM C-110	
OPERATOR		FILE THE	ORIGINAL	AND 4	COPIES	WITH TH	E APPROPRIATE OF		1 m 4 1 1 1 6 6 1 m	
Company or Operator	-					1	Lease		Well No.	
	iya Wen	<u></u>					and the second			
Unit Letter	Section	Township	· .				County			
Pool	1	<u></u>				r	Kind of Lease (State, Fed Fee)			
		1.)					Kind of Lease (State, I	red Fee)		
	ces oil or con		isate Unit Lett		ter Section		Township	Rang	Range	
give lo	ocation of tank	s								
Authorized transporter of	foil 🚺 or c	ondensate [Addres	s (give add	dress to which approved	copy of this f	orm is to be sent)	
			Actually C			es	og sindrend, My			
Authorized transporter of	casing head		5 Date	e Con-	-+		lress to which approved	copy of this f	orm is to be sent)	
			nect	ed						
If gas is not being sold,	give reasons a	and also explain it:	s present dis	spo si tion :		1927				
New Well					Change in Ownership Other (explain below) Olars a optimizing encomplete derow 2. C. Copyell, Other loss of a starting derow 1, 2961.					
R em ark s			LE(21	F				
The undersigned certif	ies that the	 					ssion have been comp	blied with.		
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	ON SERVAT	ION COMMISSION	N 				/		/	
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