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NUMBER OF COPIES RECEIVED DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER GAS PRORATION OFFICE	3	CERTIFI	CATE	SANT OF CO	ra fe, n M plia i	EW ME	AND AUTHORIZ	TOTAL SERVICE CHANGE	FORM C-110 (Rev. 7-60)
OPERATOR /		FILE THE O	RIGINAL	AND 4 C	OPIES WI	TH THE	APPROPRIATE OF		1 1
Company or Operator	neco Oi						Lease NOK Allen Baketa	• • • • •	Well No.
Unit Letter				Range		· · ·	County		HIELE AND DESCRIPTION OF THE PERSON OF THE P
D 1 29N Pool Basin Dakota					12W	F	San Juan Kind of Lease (State, Fed, Fee)		
If well produces oil or condensate				nit Letter Section			(Fee) Range		
give location of tanks Authorized transporter of oil or condensate x				D	Address (give address to u		ess to which approved	copy of thi	12W is form is to be sent)
Plateau, Ind							oomfield, New	Mexico	
Authorized transporter of c		Is Gas A	r <u>i</u> _	Con-	 		ess to which approved	copy of thi	is form is to be sent)
El Paso Nati			nect				rmington, New		
If gas is not being sold, gi			Present di	enocition:	1		iming our; new	MEXICO	
	hange in Tr Oil	ansporter (check on Dry ad gas . Cond	e) Gas densate		(please cl Change i Other (ex	n Owner	ship		
		ETTe	ctive]	L-L-64		·		and a	The second of th
Remarks							· · · · · · · · · · · · · · · · · · ·	A STATE OF THE STA	्रहें
		ge name from Oil Company		co Corp	o., act	ing by	y & thru its m	anagin	g agent,
The undersigned certifie		Rules and Regula	•			Commi	ssion have been com	plied with	1.
OIL CO		TION COMMISSION			Ву		- , - , - , - ,		
Supervisor Dist.	<i>e (ei</i>	merf			Tiele Company		strict Office S	Superv	DEC 1 9 1963
DEC 1 9 1963					1441622		0. Box 1714	,	OIL CON. COM

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