NUMBER OF COPIES RECEIVED CISTEISUTION SANTA FF FILE U.S.G.S. LAND OFFICE TRANSPORTER GAS		ICATE OF CO	NTA FE, NEW		
PROBATION OFFICE		ORIGINAL AND 4	COPIES WITH	THE APPROPRIATE O	
Company or Operator & Gas	Company			Robinson Unit	well NO.
Unig Letter Seat	B ^{Letter} Section Township 168 Range		325	325 County Les	
Ponobinson Grayburg	, <u>1</u> , ₁ ,			Kind of Lease (State, Federal	Fed, Fee)
If well produces oil give location	Unit Letter	stion Section	n Township	Range	
Authorized transporter of oil 🎽 or condensate			Address (give	address to which approve	d copy of this form is to be sent)
Continental Pipel:	ine		Box 410	- Artesia, Nev	Nexico
	ls Gas	Actually Connect	red? Yes	No	······
Authorized transporter of casing head gas a or dry gas Date Con- nected					
Phillips Petroleum 1-14-60 Odessa, Texas					
Chang Oil Ca 1. Change lease x	e in Transporter (check a D sing head gas C	one) ry Gas [_] ondensate [_] ION-Federal. "I	Change in Ov Other (explai Change 1	wnership	ell number
Remarks This is to be an i Unit effective 4-3 The undersigned certifies th Exc	63	lations of the Oil C		mmission have been co 19 63 .	mplied with.
	RVATION COMMISSIO		By	in the second	<u> </u>
Approved by Defe	?		Title Distric Company Artec	ot Superintender 011 & Gas Comp	
Date			Address Box 8	47, Hobbs, New 1	fex1co