NUMBER OF COPIES RECEIVED DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER GAS PRORATION OFFICE		CERTIFIC	s, CATE OF C TRANSPO	JR I UIL ANL	MEXICO : AND AUTHORIE) NATURAL GAS	
OPERATOR OFFICE		EU E THE O	PICINAL AND	A CORIES WITH T	HE APPROPRIATE OF	FPICE 1 43 PM 163
Company or Operator	Sinelair (Oil & Gas Com		4 COTTES WITH T	Lease Lee Vaitman	Well No.
Unit Letter	Section 26	Township 148	Rang	37 5	County Lea	
Pool	n Wolfcam				Kind of Lease (State,	Fed,Fee)
If well prod	duces oil or con location of tan	densate	Unit Letter	Section 26	Township 143	Range 37E
Authorized transporter	of oil X or o	condensate [<u>'</u>	Address (give o	iddress to which approved	d copy of this form is to be sent)
Service Pi	pe line Co	mpan y		Bex 337	Midland, Texas	ı
	-	- ·	ctually Conne	cted? Yes		
Authorized transporter	of casing head	gas 🛣 or dry gas	Date Con- nected	Address (give o	address to which approved	d copy of this form is to be sent)
The Atlantic Refining Company				Box 696, Lovington, New Mexico		
If gas is not being sol	d, give reasons				proper box)	
If gas is not being sol	New Well . Change in T Oil		ON(S) FOR FILI	NG (please check	nership	•••
If gas is not being sol	New Well . Change in T Oil	REASC	ON(S) FOR FILI	NG (please check Change in Ow	nership	
Remarks	New Well . Change in T Oil Casing h	REASC	ON(S) FOR FILI e) Gas densate	NG (please check Change in Ow Other (explain	nership	
Remarks	New Well . Change in T Oil Casing h	REASC	ON(S) FOR FILI e) Gas densate	NG (please check Change in Ow Other (explain	nership	
The undersigned ce	New Well . Change in T Oil Casing h rtifies that the	REASC	ON(S) FOR FILI e) Gas densate	NG (please check Change in Ow Other (explain	nership	
Remarks The undersigned ce	New Well . Change in T Oil Casing h rtifies that the	REASC Fransporter (check on Dry nead gas . Con	ON(S) FOR FILI e) Gas densate	Change in Ow Other (explain Conservation Con	nership	mplied with.

Address

520 Mast Broadway Hobbs, New Mexico

Date