NUMBER OF COPIES RECEIVED OISTRIBUTION SANTA FI FILE U.S.G.S. LAND OFFICE TRANSPORTER OIL GAS PRORATION OFFICE OPERATOR Company or Operator	us Drill:	CERTIFI	CATE OF CO D TRANSPOR RIGINAL AND 4 (ITA FE, NEW M MPLIANCE RT OIL AND		-7 <u>CE</u> A II 64 Well No.
Unit Letter	Section	Township	Range	1	County	UU "A" 6
G	17	16 a		32 9	Lea	
Pool		_			Kind of Lease (State, Fe	ed,Fee)
Mesa Queen If well produces oil or condensate			Unit Letter	Letter Section Township Range		Range
give location of tanks			H	17	16 s	32 .
Authorized transporter Texas-New M Authorized transporter Phillips P If gas is not being sol	etroleum	Is Gas Ac as X or dry gas [Company	tually Connecte	Mic d? Yes Address (give add	lland, Texas	opy of this form is to be sent) opy of this form is to be sent)
	Change in Tra Oil	REASON	as		rship ,	
	·····					
	Executed t	11+h		By /	ssion have been compli _, 19 <u>64</u> . Mr. 13 le	
Title ()				Company	resident Drilling Comp	anv
Date				Address	5, Hobbs, New	