NUMBER OF COPIES RECEIVED OITTRIBUTION SANTA FC U.B.G.B. OFFICE OPERATOR OPERATOR Company or Operator Company or Operator Company or Operator Unit Letter P Section To	CERTIFIC TO	SA CATE OF C TRANSPO	COPIES WITH THI	EXICO AND AUTHORIZA NATURAL GAS JAN 5	DI MYCH	
Pool		3		Lea.		
Hobbs	T	Unit Letter	TC	Kind of Lease (State, Fed, F	ee) ted	
give location of tanks		K	Section 29	Township 18	Range 38	
Authorized transporter of oil a or condensate			Address (give add	ress to which approved copy	of this form is to be sent)	
Shell Pipe Line Corporation			Box 1598	, Hobbs, New M	exico	
	the second s	ually Connect		No		
Authorized transporter of casing head gas a or dry gas Date Con- nected			Address (give address to which approved copy of this form is to be sent)			
Phillips Petroleum Corp. NA			Phillips	Phillips Bldg., Odessa, Texas		
	stet (check one) Dry Ga s. Conden	s	Other (explain bel To record transporte	hip	ξ 13	
Remarks The undersigned certifies that the Rule: Executed this	30th	as of the Oil Co Decen		sion have been complied 1963	with.	
OIL CONSERVATION			By	, -,		
approved by		·····	Company	District Manag	er	
NMOCC (5) SLO SW AE	s file		Address	obbo, N. M.		