MUMBER OF COPIES RECEIVED  DISTRIBUTION  SANTA FF  FILE  U.S.G.S.  LAND OFFICE  TRANSPORTER  GAS  PRORATION OFFICE  OPERATOR	CERTIFIC	CATE OI	SPORT OI	E, NEW A	MEXICO AND AU NATURA	THORIZAT	(Rev	A C-110 /. 7-60)	
Company or Operator	FILE THE O	RIGINAL AI	ND 4 COPIES		HE APPROP	RIATE OFFICE	l w	11 hT	
Social Mebil Cil Com		State *P*			we	ell No. <b>5</b>			
Unit Letter Section	Township 178	Range 35E			County	County Lon			
Pool Undesignated					Kind of Leas	se (State, Fed, Fee	e)		
If well produces oil or condensate Unit Letter				Section	Township	Township Range			
give location of tanks  Authorized transporter of oil or condensate				ess (give as	ddress to which approved copy of this form is to be sent)			he sent)	
Texas-New Mexico Pipe  Authorized transporter of casing head	Is Gas Ac	ctually Cor	nnected?	Yes	O, Midlar No X	rd, Taxes	f this form is to	be sent)	
		nected					·	•	
Phillips Petroleum Con  If gas is not being sold, give reasons	1/	/   / _		bekeye	, New Max	deo			
REASON(S) FOR FILING  New Well				Change in Ownership					
Remarks							. <u>.</u>	·	
The undersigned certifies that the	- Rules and Regulat	rions of the	Oil Conserva	tion Comr	nission have	been complied w	vi th.		
	d this the	_ day of	Septe		, 19 <b>62</b>		• • • • • • • • • • • • • • • • • • • •		
	TION COMMISSION		Ву	·		.//	///	<i></i>	
Approved by			<del></del>	enier C	lerk	t fill	45	-	
Date			Sc Addres	oc <b>eny</b> M	bbil 0il	Company, I	no,		

Box 2406, Hobbs, New Mexico