NUDELA ST OPIET RECEIVI DISTRIBUTION ANTS IST PILE US 6.9. LAND OFFICE TRANSPORTER PRORATION OFFICE OPERATOR		CERTIF	SAN CATE OF CO O TRANSPOR	MPLIANCE	AND AUTHORIZ	
Company or Operato	t)	- FILE THE	DRIGINAL AND 4	COPIES WITH T	HE APPROPRIATE OF Lease	FICE Well No.
*TEXACO Inc.				· · · · ·	**West Lovin	
Unit Letter	Section	Township	Range		County	
Z	4	<u>17-S</u>		36-E	Lea	
Viest Lov	ington				Kind of Lease (State, F	ed,Fee)
			Unit Letter	Section	Federal Township Range	
give location of tanks			J	5	17 - S	36 - E
Authorized transport	ter of casing head	***	ctually Connecte	+	No	copy of this form is to be sent)
nuulonzeu traispon	ter of casing nead	gas 🔄 or dry gas	nected	nutress (give a	aaress to unich approved o	opy oj inis jorn is to be senij
	Change in T Oil	ransporter (check on Dry ead gas . Con	e) Gas	Other (explain	ership	
**to show	w well nam	me change	from Federa	al Crosby	om Humble Oil Well No. 1 to Ve January 1,	Wost Journaton
the undersighed c					nission have been comp	lied with.
	Executed	this the <u>llth</u>	day_of	January	<u> </u>	
0	IL CONSERVA	TION COMMISSION	i	By	-11-	
O Approved by Title		FION COMMISSION	L	Title	Strict Account	ant
Approved by		, , , , , , , , , , , , , , , , , , , ,	I	Title Dis Company	ACO Inc.	cant