NUMBER OF COPIES RECEIVED   LISTRIBUTION   SANTA FI   FILE   U.S.G.S.   LAND OFFICE   TRANSPORTER   OIL   GAS   PHORATION OFFICE   OPERATOR		CERTIFI	CATE OF C O TRANSPO	OMPLIA	NCE A	AND AUTHORIZAT	ION	<b>PRM C-110</b> Rev. 7-60)	
Company or Operator	CATE CH	FILE THE C	RIGINAL AND	4 COPIES WI		APPROPRIATE OFFICE	E		
Company of Operator		. MI DARGATA	41		1	G. C. Matthews		Well No.	
Unit Letter	Unit Letter Section Township Range					County			
P	6	205	3	75					
Pool Momment			_		K	Kind of Lease (State, Fed, Fe	e)		
	es oil or conde	ensate	Unit Letter	Se	ction	Township	Range		
give lo	cation of tanks			I	6	205	37		
Authorized transporter of oil 🗍 or condensate 🗌					Address (give address to which approved copy of this form is to be sent)				
Shell Pipeli	e Corpor	ation		P., 0	, Dax	100, Lidland, Te	X-2.5		
					x				
		Is Gas Ad	ctually Connec			Yo			
Authorized transporter of casing head gas or dry gas Date Con- Namen Potroleum Corporation nected					Address (give address to which approved copy of this form is to be sent) P. O. Dax 2029, Sular, Oklandia				
	Change in Trar Oil Casing head	asporter (check one Dry ( d gas . Cond	e) Gas [] lensate []		o Owners	hip	]		
The undersigned certifi	es that the R Executed th	ules and Regulat lis the DN COMMISSION	tions of the Oil C		Commis	sion have been complied v Oly , 19			
Title /		ane	tille and the second se	Title Company		Area Production 12			
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