NUMBER OF COPIES RECEIVED DISTRIBUTION SANTA FF FILE U.S.G.S. LAND OFFICE TRANSPORTER OFFICE OPERATOR OPERATOR		CERTIFI	NEW MEXICO C SA CATE OF C O TRANSPO DRIGINAL AND 4	NTA FE, OMPLIA RT OIL	NEW M	AND AUT	_ GAS	FORM C-110 (Rev. 7-60)	0	
Company or Operator Cities Service Petroleum Compa						Lease		Well No.		
				Range		County	State D	2		
G	32	21-5				Lea				
Pool						Kind of Lease	(State, Fed, Fee)			
If well produces oil or condensate Unit I					Section	Township	State Township Range			
give l	· · · · · · · · · · · · · · · · · · ·	* 32				21-5	36-E his form is to be sent)			
Authorized transporter o		ine Company		Ba	x 1510	0 - Midiar		its form is to be sent)		
	· · · · · ·		Ctually Connec				manual conv of th	his form is to be conti		
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) Box 66 - 011 Center, New Mexico					
	Change in Tra Oil	REASC	e) Gas	Change Other Change Clang	in Owne explain b C 1121 S Ser	elow) NG OF OPOF	etor from Company to: Dieum Compa			
							1-	-1-63/		
Remarks										
	()	10 is to be	enter of le	1-1-61						
The undersigned certi	fies that the R	ules and Regula 28th		Conservatio	n Comm	_	een complied wit	h.		
	Executed t		day of	Bv		<u>, 19</u> .				
Approved by	CON SERVATI	ON COMMISSION			Inc	1 1				
Chin Mind all					Title District Clerk					
Fitle		Company								
/		Citics Service Patroleum Company								
Date				Address	80	× 97 - Hol	368, New He	xi co		