

**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS**

FILE THE ORIGINAL AND A COPY WITH THE APPROPRIATE OFFICE

Company and Operator: **Graham State (NCT-I)** Well No. **1**

Unit Letter **M** Section **19** Township **21S** Range **37E** County **State**

Pool **Paddock** Kind of Lease (State, Fed, Fee) **State**

If well produces oil or condensate give location of tanks: Unit Letter **M** Section **19** Township **21S** Range **37E**

Authorized transporter of oil ☐ or condensate ☐ Address: give address to which approved copy of this form is to be sent:

Is Gas Actually Connected? Yes ☐ No ☐

Authorized transporter of casing head gas ☐ or dry gas ☐ Date Connected: Address: give address to which approved copy of this form is to be sent:

If gas is not being sold, give reasons and also explain its present disposition:

**ILLEGIBLE**

**REASON(S) FOR FILING** (please check proper box)

New Well ☐ Change in Ownership ☐  
Change in Transporter (check one) Other (explain below)  
Oil ☐ Dry Gas ☐  
Casing head gas ☐ Condensate ☐

Remarks  
**Blinebry, Drinkard & Paddock commingled PLC-3**

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_.

OIL CONSERVATION COMMISSION		By
Approved by		Title
Title		Company
Date		Address