NUMBER OF COPIES RECEIVED DISTRIBUTION SANTA FI FILE U.S.G.S. LAND OFFICE TRANSPORTER GAS PRORATION OFFICE OPERATOR	CERTIFIC TO	TRANSPOR	MPLIANCE T OIL AND	MEXICO : AND AUTHORIZ D NATURAL GAS		
into Ariantie R. Company or Operator	lair Oil & Gas C	IT COKPORY.	TION	Lease Mattie E.	Well No.	
	nit Letter Section Township		Range 36E		County Lea	
Pool		Kind of Lease (State, Fed, Fee)				
If well produces oil or condensate		Unit Letter Section		Township	Range	
give location Authorized transporter of oil	L	Address (give		copy of this form is to be sent)		
	Pipeline Compar	y	Ridle	nd, Texas		
		tually Connecte		No	copy of this form is to be sent)	
Authorized transporter of casin	nected	Address (give address to which approved copy of this form is to be sent)				
United Carbon Company Unite			Runice, New Mexico			
Chan O		Change in O	(please check proper box) Change in Ownership			
Remarks Piled to Mattie I	. Shipley Wil.			y Will to new neme		
	xecuted this the				_	
	SERVATION COMMISSIO		Ву			
Approved by	1. Clan	into	Title	District Superis	tendezt	
Title (wi)	A Committee of the second		Company	Sinelair Oil & O	las Company	
Date	+ 311 A + 3111		Address	520 E. Broadway,	Hobbs, N. H.	

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