NUMBER OF COPIES RECEIVED CISTRIBUTION SANTA FI FLL: U.S.G.S. LAND OFFICE			E E W W		FORM C-110 (Rev. 7-60)
TRANSPORTER OIL GAS PRORATION OFFICE OPERATOR	тот	RANSPORT O	IL AND	NATURAL GAS	
Company or Operator				Leuse Ro llon Brunson	Well No.
Unit Letter Section T B 10	ownship 22S	Range 372		County	
Pool Drinkard				Kind of Lease (State, Fed, F FGE	ee)
If well produces oil or condensate give location of tanks		it Letter G	Section 10	Township 22S	Range 37E
Authorized transporter of oil or condensate Address give a ldress to which approved copy of this form is to be sent)					
Shell Pipeline Corporation					
Is Gas Actually Connected? YesNc					
Authorized transporter of casing head gas or dry gas [] Date Convert Address give address to which approved copy of this form is to be sent) nected					
Carman Francisca Componentica					
REASON(S) FOR Fil. IN 3 (please check proper box) New Well Change in Transporter (check one) Change in Transporter (check one) Oil Oil Casing head gas Condensate Oil Casing head gas Condensate Oil Casing head gas Condensate Oil Casing head					
The undersigned certifies that the Ru	lles and Regulations	s of the Oil Coase:	vation Comm	nission have been complied	l with.
Executed this the day of			ئے۔ بال	19	
OIL CONSERVATIO	N COMMISSION	B⊻			
Approved by		Tati	.e	an an Anna an Anna Anna Anna Anna Anna	
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Date		Add	ress	e ol ikat álfti, lati	ita, Rostina da d