

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Company or Operator _____ Lease _____
Well No. 23 Unit Letter D S 25 T R Pool _____
County _____ Kind of Lease (State, Fed. or Patented) Federal
If well produces oil or condensate, give location of tanks: Unit S T R
Authorized Transporter of Oil or Condensate _____
Address _____
(Give address to which approved copy of this form is to be sent)
Authorized Transporter of Gas _____
Address _____ Date Connected _____
(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:

Reasons for Filing: (Please check proper box) New Well ☒ ()
Change in Transporter of (Check One): Oil () Dry Gas () C'head () Condensate ()
Change in Ownership () Other ()

Remarks: _____ (Give explanation below)
_____ Gas
_____ Continental Oil Company
_____ Continental Oil Company
_____ Continental Oil Company

ILLEGIBLE

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

Executed this the _____ day of _____ 19 _____

By _____
Title _____

Approved _____ 19 _____

OIL CONSERVATION COMMISSION

Company _____

Address _____

By _____

Title _____

0/4 MIOCC WAM SW File