Pool Jalm: 5 (Gas) If well produces oil or conde give location of tanks	CERTIFICAT TO THE FILE THE ORIGIN Lawn Corporati Township 24.5	SANT E OF COM RANSPOR	TOIL AND OPIES WITH TH 375 Section	EXICO AND ALLEG NATURAL G E APPNOPACTE Lease () 1870375 VF County Xind of Lease (Sta Township	(Rev. 7-60) <b>RJZE J! O.N.</b> <b>AS</b> <b>7</b> 0F <b>36</b> CE <b>AH '63</b> Well No. Well No. Well No. Well No.
Is Gas Actually Connected? YesNo					
Authorized transporter of casing head ge Northern Petarca, Gas Con	Date Con- nected L=28-55	Address (give address to which approved copy of this form is to be sent) Box 2376, Nobles, Lee Lierchese			
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   Condensate Other (explain below)   Porm filled to show first filled to show filled first filled to show filled first filled f					
ILLEG Remarks	NAME CH FROM: PA		AN PETR. ( CTION <b>CO.</b>	CORP.	
	EFFECTIVE	: 2·1· <b>7</b> 1			
The undersigned certifies that the					en complied with.
Executed	this the 12th d	ay ofNor	maber	, 19 🔔 .	
	TION COMMISSION			al Signed by: STALEY	
Approved by		Tide Area Superintendent			
Title			Company		em Corporabion
Date			Address Box 68 -	· Hobbs, Naw	lieni <b>co</b>

## House and a.c.

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