

<div>NUMBER OF COPIES RECEIVED</div> <div>DISTRIBUTION</div> <table><tr><td>SANTA FE</td><td></td><td></td></tr><tr><td>FILE</td><td></td><td></td></tr><tr><td>U.S.G.S.</td><td></td><td></td></tr><tr><td>LAND OFFICE</td><td></td><td></td></tr><tr><td>TRANSPORTER</td><td>OIL</td><td></td></tr><tr><td></td><td>GAS</td><td></td></tr><tr><td>PRODUCTION OFFICE</td><td></td><td></td></tr><tr><td>OPERATOR</td><td></td><td></td></tr></table>		SANTA FE			FILE			U.S.G.S.			LAND OFFICE			TRANSPORTER	OIL			GAS		PRODUCTION OFFICE			OPERATOR			<div>NEW MEXICO OIL CONSERVATION COMMISSION</div> <div>SANTA FE, NEW MEXICO</div> <div>CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS</div>		<div>FORM C-110</div> <div>(Rev. 7-60)</div>	
SANTA FE																													
FILE																													
U.S.G.S.																													
LAND OFFICE																													
TRANSPORTER	OIL																												
	GAS																												
PRODUCTION OFFICE																													
OPERATOR																													
FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE																													
Company or Operator <b>NEWMONT OIL COMPANY</b>			Lease <b>ETZ "C"</b>		Well No. <b>4</b>																								
Unit Letter <b>0</b>	Section <b>34</b>	Township <b>16S</b>	Range <b>30E</b>	County <b>EDDY</b>																									
Pool <b>SQUARE LAKE</b>			Kind of Lease (State, Fed, Fee) <b>FEDERAL</b>																										
If well produces oil or condensate give location of tanks		Unit Letter <b>I</b>	Section <b>34</b>	Township <b>16S</b>	Range <b>30E</b>																								
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>Continental Pipe Line</b>			Address (give address to which approved copy of this form is to be sent) <b>Artesia, New Mexico</b>																										
Is Gas Actually Connected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>																													
Authorized transporter of casing head gas <input checked="" type="checkbox"/> or dry gas <input type="checkbox"/> <b>Phillips Petroleum Co.</b>		Date Connected	Address (give address to which approved copy of this form is to be sent) <b>Bartlesville, Oklahoma</b>																										
If gas is not being sold, give reasons and also explain its present disposition:																													
<div>REASON(S) FOR FILING (please check proper box)</div> <div>New Well ..... <input type="checkbox"/> Change in Ownership ..... <input type="checkbox"/></div> <div>Change in Transporter (check one)</div> <div>Oil ..... <input type="checkbox"/> Dry Gas ..... <input type="checkbox"/></div> <div>Casing head gas . <input type="checkbox"/> Condensate.. <input type="checkbox"/></div> <div>CHANGE OF OPERATOR FROM J. CLEO THOMPSON TO NEWMONT OIL COMPANY</div>																													
RECEIVED MAR 16 1962 ARTESIA, OFFICE																													
Remarks																													
The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.																													
Executed this the <u>12th</u> day of <u>MARCH</u> , 19 <u>62</u> .																													
OIL CONSERVATION COMMISSION			By ORIGINAL SIGNED BY H. J. LEDBETTER																										
Approved by <i>M L Armstrong</i>			Title <b>SUPERINTENDENT</b>																										
Title <b>OIL AND GAS INSPECTOR</b>			Company <b>NEWMONT OIL COMPANY</b>																										
Date <b>MAR 16 1962</b>			Address <b>300 BOOKER BLDG., ARTESIA, NEW MEXICO</b>																										