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| OIL GAS                   |   |
| PRORATION OFFICE          |   |
| OPERATOR                  |   |

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

|  |                     |                       |                               |   |   |                      |  |
|--|---------------------|-----------------------|-------------------------------|---|---|----------------------|--|
| Company or Operator<br><b>Neil E. Salsich</b>  |                     |                       |                               | Lease<br><b>Root-Federal Tract 2</b>  |   | Well No.<br><b>5</b> |  |
| Unit Letter<br><b>P</b>  | Section<br><b>1</b> | Township<br><b>17</b> | Range<br><b>29</b>            |   | County<br><b>Eddy</b>                             |                      |  |
| Pool<br><b>Square Lake</b>   |                     |                       |                               |   | Kind of Lease (State, Fed, Fee)<br><b>Federal</b> |                      |  |
| If well produces oil or condensate<br>give location of tanks   |                     |                       | Unit Letter<br><b>P</b>       | Section<br><b>1</b>   | Township<br><b>17</b>                             | Range<br><b>29</b>   |  |
| Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/><br><br><b>Texas-New Mexico Pipeline Company</b> |                     |                       |                               | Address (give address to which approved copy of this form is to be sent)<br><br><b>P. O. Box 1510, Midland, Texas</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"/><br><br><b>Skelly Oil Company</b>       |                     |                       | Date Connected<br><b>9-62</b> | Address (give address to which approved copy of this form is to be sent)<br><br><b>P. O. Box 1135, Eunice, New Mexico</b> |   |                      |  |

If gas is not being sold, give reasons and also explain its present disposition:

|  |   |
|--|---|
| <b>REASON(S) FOR FILING (please check proper box)</b>                                      |   |
| New Well ..... <input type="checkbox"/>  | Change in Ownership ..... <input checked="" type="checkbox"/> |
| Change in Transporter (check one)  | Other (explain below)   |
| Oil ..... <input type="checkbox"/> Dry Gas ..... <input type="checkbox"/>                  |   |
| Casing head gas <input checked="" type="checkbox"/> Condensate... <input type="checkbox"/> |   |
| <br><b>Change in ownership from Sage Oil Company to Neil E. Salsich</b>                    |   |

Remarks

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

|  |   |
|--|---|
| Executed this the <b>29th</b> day of <b>January</b> , 19 <b>64</b> . |   |
| <b>OIL CONSERVATION COMMISSION</b>                                   | By <b>Neil E. Salsich</b>                     |
| Approved by <b>M. L. Armstrong</b>                                   | Title <b>Owner</b>                            |
| Title <b>OIL AND GAS INSPECTOR</b>                                   | Company <b>Neil E. Salsich</b>                |
| Date <b>FEB 3 1964</b>   | Address <b>411 N. Loraine, Midland, Texas</b> |

**RECEIVED**  
**FEB 3 1964**  
**O. C. C.**  
**ARTESIA, OFFICE**