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ARTESIA, OFFICESTATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENTForm C-104
Revised 10-01-78
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NO. OF TONNES RECEIVED	
DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
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TRANSPORTER	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator FROSTMAN OIL CORPORATION

Address P. O. DRAWER W, ARTESIA, NEW MEXICO 88210

Reason(s) for filing (Check proper box)

☐ New Well ☐ Change in Transporter oil ☐ Dry Gas

☐ Recompletion ☐ Oil ☐ Condensate

☒ Change in Ownership ☐ Casinghead Gas

Other (Please explain) CHANGE OF OPERATOR AND OWNERSHIP

If change of ownership give name and address of previous owner HAPPY OIL COMPANY, INC., P. O. BOX 770, ARTESIA, NM 88210

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>GILLESPIE STATE</u>	Well No. <u>1</u>	Pool Name, including Formation <u>EAST EMPIRE YATES SEVEN RIVERS</u>	Kind of Lease State, Federal or Fee <u>State</u>	Lease No. <u>B-2071</u>
Location Unit Letter <u>D</u> : <u>990</u> Feet From The <u>North</u> Line and <u>990</u> Feet From The <u>West</u>				
Line of Section <u>27</u> Township <u>17S</u> Range <u>28E</u> , NMPM, <u>EDDY</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>NAVAJO REFINING COMPANY</u>	<u>P. O. Drawer 159, Artesia, NM 88210</u>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Is gas actually connected? <input type="checkbox"/> When
Unit <u>C</u> Sec. <u>27</u> Twp. <u>17S</u> Rge. <u>28E</u>	

If this production is commingled with that from any other lease or pool, give commingling order number: _____

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

FROSTMAN OIL CORPORATION

BY: Clarence Forister

(Signature)

Clarence Forister, President

(Title)

October 18, 1985

(Date)

OIL CONSERVATION DIVISION

APPROVED JAN 10 1986

BY Original Signed By

Mike Williams

TITLE Oil & Gas Inspector

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

Posted ID-3
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1-10-86