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ARTESIA, OFFICESTATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENTForm C-104  
Revised 10-01-78  
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## OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

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REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Month

Operator FROSTMAN OIL CORPORATION TH

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

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain)  <b>CHANGE OF OPERATOR AND OWNERSHIP</b>
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas	
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate	

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>STATE B - 1969 TR. 1</u>	Well No. <u>11</u>	Pool Name, including Formation <u>Empire Yates Seven Rivers East</u>	Kind of Lease <u>State, Federal or Fee State</u>	Lease No. <u>B-1969</u>
Location				
Unit Letter <u>O</u> : <u>990</u> Feet From The <u>South</u> Line and <u>2310</u> Feet From The <u>East</u>				
Line of Section <u>22</u> Township <u>17 S</u> Range <u>28 E</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"/> <u>NAVAJO REFINING COMPANY</u>	Address (Give address to which approved copy of this form is to be sent) <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) <u>Post #0-3</u> <u>1-31-86</u> <u>Chg Up</u>	
If well produces oil or liquids, give location of tanks.	Unit <u>O</u>	Sec. <u>22</u>
	Twp. <u>17S</u>	Rge. <u>28E</u>
Is gas actually connected?		When <u>1-31-86</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 27 1986, 19 \_\_\_\_\_

BY \_\_\_\_\_ Original Signed By  
Les A. Clements

TITLE Supervisor District II

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.