STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE	✓	
FILE	✓	✓
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL ✓	
	GAS ✓	
OPERATOR	✓	
PRORATION OFFICE		

RECEIVED BY
FEB 14 1985
O. C. D.
ARTESIA, OFFICE

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator: FROSTMAN OIL CORPORATION ✓ 30-015-23653

Address: P. O. BOX 161, ARTESIA, NM 88210

Reason(s) for filing (Check proper box)
- ☐ New Well
- ☐ Recompletion
- ☐ Change in Ownership
- Change in Transporter of: ☐ Oil ☐ Casinghead Gas ☐ Dry Gas ☐ Condensate
- Other (Please explain): CHANGE OF OPERATOR

If change of ownership give name and address of previous owner: Forister & Sweatt, P. O. Box 161, Artesia, NM 88210

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Bear Draw	1	Bear Draw Queen Grybg SA	State, Federal or Fee Federal	NM-15007

Location: Unit Letter I : 1980 Feet From The South Line and 660 Feet From The East

Line of Section 28 Township 16S Range 29E , NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐: Conoco Inc., Surface Transportation	Address (Give address to which approved copy of this form is to be sent): P.O. Box 2587, Hobbs, NM 88240
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐: Conoco Inc.	Address (Give address to which approved copy of this form is to be sent): Rt. 12, Box 2805, Odessa, TX 79763

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	I	28	16S	29E	Yes	11/13/81

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

post ID-1
2-22-85
Chg. Op. Name

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.

Nancy Forister
(Signature)

PRESIDENT
(Title)

February 12, 1985
(Date)

OIL CONSERVATION DIVISION

APPROVED FEB 19 1985, 19____

BY Original Signed By
Leslie 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.