

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form C-104
Revised 10-01-78
Format 06-01-83
RECEIVED 501

JUL 15 '88

O. C. D.
ARTESIA, OFFICE

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DISTRIBUTION		
SANTA FE		✓
FILE		✓
U.S.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	✓
OPERATOR		✓
PRODUCTION OFFICE		

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Arapaho Oil and Gas, Inc. ✓ WIW

Address
P.O. Box 682, Tatum, NM 88267

Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate	Change of Operator

If change of ownership give name and address of previous owner
Frostman Oil Corporation

II. DESCRIPTION OF WELL AND LEASE

Lease Name Cave Pool Unit	Well No. 53	Pool Name, including location GRAYBURG JACKSON SR 0- CAVE GRAYBURG SAN ANDRES	Kind of Lease State, Federal or Fee Fed	Lease No. L00284801
Location Unit Letter <u>H</u> : <u>1650</u> Feet From The <u>North</u> Line and <u>330</u> Feet From The <u>East</u> Line of Section <u>7</u> Township <u>17S</u> Range <u>29E</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"/> Injection Well	Address (Give address to which approved copy of this form is to be sent)
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.	Unit Sec. Twp. Rge. Is gas actually connected? When

If this production is commingled with that from any other lease or pool, give commingling order number: 7-22-88
NOTE: Complete Parts IV and V on reverse side if necessary. *Chg op*

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.

Arapaho Oil and Gas, Inc.
Rex E. Glenn
(Signature)
Rex Glenn President
July 14, 1988
(Date)

OIL CONSERVATION DIVISION
JUL 19 1988
APPROVED _____, 19____
Original Signed By
BY Mike Williams
Oil & Gas Inspector
TITLE _____

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 deviated 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 multiple completed wells.