

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF DEEP DEWELLS	
DISTRIBUTION	
SANTA FE	☒
FILE	☒
U.S.G.A.	
LAND OFFICE	
TRANSPORTER	☒
OPERATOR	☒
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

FEB 13 1985

O. C. D.
ARTESIA, OFFICE

REQUEST FOR ALLOWABLE
AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Revised 10-01-78
Format 05-01-83
Page 1

I. Operator
FROSTMAN OIL CORPORATION

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

Reason(s) for filing (Check proper box)
☐ New Well
☐ Recompletion
☐ Change in Ownership
☐ Change in Transporter oil
☐ Oil
☐ Condensate Gas
☐ Dry Gas
☐ Condensate
CHANGE OF OPERATOR

Other (Please explain)

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Alcott	Well No. 2	Pool Name, including Formation So. Loco Hills, Q-G-SA	Kind of Lease State, Federal or Free Federal Federal	Lease No. NM0924
Location Unit Corner H : 660 Feet From The East Line and 1980 Feet From The North Line of Section 31 Township 18S Range 29E NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

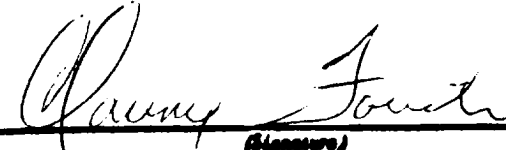
Name of Authorized Transporter of Oil ☒ or Condensate ☐ Navajo Crude Oil Purchasing	Address (Give address to which approved copy of this form is to be sent) P. O. Drawer 159, Artesia, NM 88210
Name of Authorized Transporter of Condensate Gas ☒ or Dry Gas ☐ Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) Bartlesville, OK 74004
If well produces oil or liquids, give location of tanks. Unit: H Sec: 31 Twp: 18s Rge: 29e	Is gas actually connected? Yes When 1/1/76

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.


PRESIDENT
February 12, 1985

OIL CONSERVATION DIVISION

FEB 19 1985

APPROVED _____, 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.

Post ID-3
2-22-85
Chg. Op. Name