

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

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SANTA FE, NEW MEXICO 87501

FEB 13 1985

O. C. D. REQUEST FOR ALLOWABLE
ARTESIA OFFICE 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	☐ Change in Transporter oil:	☐ Dry Gas
☐ Reconpletion	☐ Oil	☐ Condensate
☐ Change in Ownership	☐ Coolinghead Gas	

Other (Please explain)
CHANGE OF OPERATOR

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 Aztec State	Well No. 3	Pool Name, including Formation So. Loco Hills, Q-G-SA	Kind of Lease State, Federal or Fee State	Lease No. L-6518
Location				
Unit Letter G	1980	Feet From The North Line and	1980	Feet From The East
Line of Section 32	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 Coolinghead 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 Sec. Twp. Rge. E 32 18S 29E
Is gas actually connected?	When Yes 3/1/77

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

MAR 6 1985

APPROVED _____, IS _____

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.