

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

Form C-104
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OIL CONSERVATION DIVISION

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PRODUCTION OFFICE	

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P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

FEB 13 1985

O. C. D.

REQUEST FOR ALLOWABLE
AND

ARTESIA AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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 ☐ Dry Gas
☐ Coolinghead Gas ☐ Condensate

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	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Miller	1	Atoka-San Andres	State, Federal or Fee	
Location				
Unit Letter F : 2310 Feet From The North Line and 1650 Feet From The West				
Line of Section	Township	Range	NMPM	County
22	18S	26E	Eddy	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

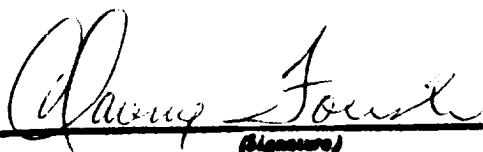
Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
Navajo Crude Oil Purchasing	P. O. Drawer 159, Artesia, NM 88210
Name of Authorized Transporter of Coolinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Company	Bartlesville, OK 74004
If well produces oil or liquids, give location of tests.	Is gas actually connected? When
Unit F Sec. 22 Twp. 18S Rge. 26E	Yes 12/80

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

(Signature)

(Title)

February 12, 1985

(Date)

OIL CONSERVATION DIVISION

MAR 6 1985

APPROVED _____, 18 _____

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.