STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

Form C-104
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PRORATION OFFICE		

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

RECEIVED BY
FEB 13 1985
O. C. D.
ARTESIA, OFFICE

REQUEST FOR ALLOWABLE AND 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 of:
  - [ ] Oil
  - [ ] Casinghead Gas
  - [ ] Dry 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 (State, Federal or Fee)	Lease No.
Miller	1	Atoka-San Andres	Fee	

Location: Unit Letter F : 2310 Feet From The North Line and 1650 Feet From The West

Line of Section 22 Township 18S Range 26E , NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [X] 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 Casinghead Gas [X] or Dry Gas [ ]: Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent): Bartlesville, OK 74004 Post FD-3 3-8-85 Eng. Dept.
If well produces oil or liquids, give location of tanks. Unit: F Sec.: 22 Twp.: 18S Rge.: 26E	Is gas actually connected? Yes When: 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.

Clarence Forister
(Signature)

PRESIDENT
(Title)

February 12, 1985
(Date)

OIL CONSERVATION DIVISION

APPROVED MAR 6 1985, 19____

BY Original Signed By
Leslie A. Clements
Supervisor District II

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 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.