

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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GAS	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
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OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Frostman Oil Corporation	
Address P. O. Box 161, Artesia, NM 88210	
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"/> Gashead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate Change of Operator

If change of ownership give name and address of previous owner

Ray W. Tall

II. DESCRIPTION OF WELL AND LEASE

Lease Name Denton Federal	Well No. 1	Pool Name, including Formation Trky Tr 7 Rvrs On Gry Brg	Kind of Lease State, Federal or Fee Federal	Lease No. IC067132
Location				
Unit Letter C	660'	Feet From The north Line and 2080	Feet From The West	
Line of Section 27	Township 18-S	Range 29-E	NMPM, Eddy	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"/> Navajo Refining Company	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 Gashead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> 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.	Is gas actually connected? When
Unit C Sec. 27 Twp. 18 Rge. 29	yes 3-20-81

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.

[Signature]
(Signature)
President
(Title)
January 31, 1985
(Date)

OIL CONSERVATION DIVISION

APPROVED **FEB 21 1985**, 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.