

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

Form C-104
Revised 10-01-78
Formal 08-01-83
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NO. OF OFFICE COPIES	
DISTRICT	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.G.A.	
LAND OFFICE	
TRANSPORTER	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
FORMATION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

RECEIVED BY
FEB 12 1986
O. C. D.
ARTESIA, OFFICE

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator
FROSTMAN OIL CORPORATION

Address
P. O. DRAWER W, ARTESIA, NEW MEXICO 88210

Reason(s) for filing (Check proper box) Other (Please explain)

New Well Change in Transporter of:
 Recombination Oil Dry Gas
 Change in Ownership Casinghead Gas Condensate

CHANGE OF OPERATOR

If change of ownership give name and address of previous owner JEM Resources, Inc., P. O. Box 648, Artesia, NM 88210

II. DESCRIPTION OF WELL AND LEASE

Lease Name Levers	Well No. 1	Pool Name, including Formation CAVE GRAYBURG SAN ANDRES	Kind of Lease State, Federal or Fee Fed. LC	Lease No. 037777A
Location Unit Letter K : 1980 Feet From The South Line and 1980 Feet From The West Line of Section 33 Township 16S Range 29E , 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 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 <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 33	Twp. 16S	Rge. 29E
	Is gas actually connected?		When	
	No		12-3 1-2-86	

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.

FROSTMAN OIL CORPORATION

Clarence Forister
Clarence Forister (Signature)
President
(Title)

January 6, 1986
(Date)

OIL CONSERVATION DIVISION
FEB 14 1986

APPROVED _____, 19____

BY _____ Original Signed By
Les 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.