

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

Form C-104
Revised 10-01-78
Format 08-01-83
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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES DESIRED	
DISTRIBUTION	
SANTA FE	
FILE	
N.M.S.A.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
PERMITTING OFFICE	

I. Operator
FROSTMAN OIL CORPORATION

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

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	<input type="checkbox"/> Change in Transporter of:	<input type="checkbox"/> Dry Gas	Other (Please explain) CHANGE OF OPERATOR
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Condensate	
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas		

If change of ownership give name and address of previous owner Crown Central Petroleum Corp., 4747 Bellaire Blvd., Bellaire, Texas 77401

II. DESCRIPTION OF WELL AND LEASE

Lease Name Mal-Gra Unit D	Well No. 2	Pool Name, including Formation Maljamar Grayburg SA	Kind of Lease State, Federal or Fee	State State	Lease No. B-2148
Location Unit Letter <u>E</u> : <u>1980</u> Feet From The <u>N</u> Line and <u>660</u> Feet From The <u>W</u>					
Line of Section <u>21</u> Township <u>17 South</u> Range <u>33 East</u> , NMPM, Lea 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"/>	Address (Give address to which approved copy of this form is to be sent)
Texas-New Mexico Pipeline Company	P. O. Box 2528, Hobbs, NM 88240
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Company 66 Natl Gas Co.	Bartlesville, OK 74004
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit <u>J</u> Sec. <u>20</u> Twp. <u>17S</u> Rge. <u>33E</u>	Yes 10/31/55

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

BY: Harry F. Smith

(Signature)

President

(Title)

March 2, 1987

(Date)

OIL CONSERVATION DIVISION

MAR 5 1987

APPROVED _____, 19 _____

BY: ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPERVISOR

TITLE _____

This form is to be filed in compliance with RULE 1184.

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.