

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION

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

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
APOLLO ENERGY, INC.

Address
P.O. BOX 8097 ROSWELL, NEW MEXICO 88201

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain) EFFECTIVE 1-SEP-87
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas	
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate	

If change of ownership give name and address of previous owner QUANICO OIL & GAS, Inc. P.O. BOX 1714, ELDORADO AR. 71730

II. DESCRIPTION OF WELL AND LEASE

Lease Name MAC FEDERAL Well No. 2 Pool Name, including Formation CATO (SAN ANDRES) Kind of Lease State, Federal or Fee FEDERAL Lease No. NM-25478

Location
Unit Letter P ; 330 Feet From The EAST Line and 990 Feet From The SOUTH
Line of Section 6 Township 9S Range 30E , NMPM, CHAVES 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"/> <u>PERMIAN</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. BOX 1183, HOUSTON TX. 77001</u>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>CITIES SERVICE</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. BOX 300, TULSA, OK. 74102</u>
If well produces oil or liquids, give location of tanks.	Is gas actually connected? <u>NO</u> When <u>ON 11/76</u> <u>OFF 7/87</u>

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.

Andrew L. Prestridge
Andrew Prestridge (Signature)

PROJECT ENGINEER

(Title)
7 OCT 87
(Date)

OIL CONSERVATION DIVISION

OCT 13 1987

APPROVED _____, 19____

BY Paul Kautz
Orig. Signed by
Geologist

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.

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