

APOLLO

Apollo Energy, Inc. / P. O. Box 5315 / Hobbs, New Mexico 88241 / Phone (505) 397-3596

September 13, 1985

New Mexico Oil Conservation Division
P. O. Box 1980
Hobbs, New Mexico 88240

Attention: Mr. Jerry Sexton

Re: Well Tests and Meter Proving
Cato San Andres Field
Chaves County, New Mexico

Dear Mr. Sexton:

As per my discussion with Ms. Evelyn Downs of your office, Apollo Energy, Inc., requests Commission approval to continue current practice of testing wells by a portable well tester rather than using mostly "out of service" separator meters at each battery in the Cato San Andres Field.

Almost all wells in the Cato Field are stripper averaging 2 - 3 BOPD and some water. It has been my experience over the last 3 1/2 years in this field, the well test are more dependable and cost effective under the present system than the previous ones which I believe were not used in years (I suspect the tests were "boiler house").

Please inform me of your decision at your earliest convenience. I appreciate your cooperation and look forward to a favorable response.

Yours truly,

APOLLO ENERGY, INC.


M. Y. (Merch) Merchant
President

MYM/jh

CORRECTED REPORT

SHELL OIL COMPANY
COMMINGLING REQUEST FORM
FOR THE
STATE OF NEW MEXICO
OIL CONSERVATION
COMMISSION

*File
7-11-77
stop to amendment
dated Aug 21 77*

APPLICATION FOR EXCEPTION TO COMMISSION RULE 303a AND/OR 309A

1. Operator	SHELL OIL COMPANY		5. Commission Dist. No.	
2. Address	P. O. BOX 576		6. County	Chaves
3. City	HOUSTON	4. State	TEXAS	7. Date of Application
8. Identification of leases and pools as shown on statewide oil proration				
9. Field Name	Lease Name	Pool (Zone) Name	API Gravity Range	Lease Location S-T-R
Cato	Thelma Crosby	San Andres	23.9	5-9S-30E
Cato	Thelma Crosby-B	San Andres	22.2-23.9	5-9S-30E
Cato	M. H. MCGrail	San Andres	22.7	5-9S-30E
Cato	McGrail No. 2	San Andres	22.7	5-9S-30E
Cato	Thelma Crosby-C	San Andres	----	8-9S-30E

10. Request for exception to Rule 303a (segregation of production from pools)
11. Request for exception to Rule 309A (lease commingling)
12. POOL COMMINGLING (exception to Rule 303) 1.) Lease plat (required)
2.) Schematic of commingling (required)
13. Commingled royalty interest are the same Yes No
14. Are producing zones marginal or top allowable Marginal-see (a.) below
 Top allowable
- (a.) If producing zones are not capable of producing top unit allowable for their respective pools, commingling will be permitted without separately measuring the production from each pool. A 60-day period tabulation of production showing that the average daily production has been below top allowable for the subject pools.
15. Allocation of production from well zones will be by Periodic well test All zones metered All zones metered & sampled All zones except one separately metered - subtraction method
16. Will the commingling of zones or pools decrease revenue due to API gravity change Yes No
17. If answer to (16.) is "Yes" state how much less.
18. Are Federal lands or State lands involved? Yes No
19. If answer to (18.) is "Yes" furnish an approval letter from the Commissioner of Public Lands for the State of New Mexico or the Regional Supervisor of the United States Department of the Interior Geological Survey stating approval of the proposed commingling.
20. LEASE COMMINGLING (exception to Rule 309A)
- 20a. 1.) Lease plat required
2.) Schematic diagram of the commingling facility
21. All production is from the same common source of supply or an exception to Rule 303(a) has been obtained Yes No
22. If answer to (21.) is "Yes" show acceptance letter date and commission order number _____ . Same common source.
23. Allocation of production Monthly well test All leases metered All leases metered & sampled All leases except one separately metered - subtraction method

OK

24. All parties owning an interest in the Leases and the purchaser of the commingled production have consented in writing to the commingling of production from the separate leases. Yes No

25. If answer to (24.) is "No," Explain

26. Name and address of gatherer Mobil Pipe Line Co. P.O. Box 900 Dallas, Texas 75221

27. Signature *M J Adams* Title Supervisor Oil Accounting

Commingling permit number _____ Approval date _____

Approved by _____

APOLLO

Apollo Energy, Inc. / P. O. Box 5315 / Hobbs, New Mexico 88241 / Phone (505) 397-3596

October 8, 1985

New Mexico Oil Conservation Division
P.O. Box 2088
Santa Fe, New Mexico 87501

Attention: Mr. David Catanach

Re: Well Tests - Cato Field
Chaves County, New Mexico

Dear Mr. Catanach,

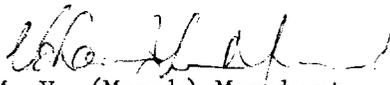
This letter is in reference to our conversation Friday, October 4, 1985, regarding the well test procedures in the Cato San Andres Field. By virtue of this letter APOLLO ENERGY, INC. request amendment to order numbers: CTB162, CTB171, CTB170 and CTB188.

All wells are stripper status and are commingled in various batteries - that is: fee with fee and federal with federal. Common royalties to the leases commingled and low volume wells makes it efficient as well cost effective to test wells with a portable well tester. It has been a practice at APOLLO to test all the wells religiously, specially because of our future plans for secondary recovery. It is important for us to know what each well produces, not only for reporting purposes but also for engineering purposes.

An amendment to the above mentioned orders and a favorable reply will be greatly appreciated. Thank you for your cooperation.

Sincerely,

APOLLO ENERGY, INC.


M. Y. (Merch) Merchant
President

MYM/lm

INSTRUCTIONS TO DELIVERING EMPLOYEE

Show to whom, date, and address where delivered Deliver ONLY to addressee (Additional charges required for these services)

RECEIPT

Received the numbered article described below.

REGISTERED NO. 24886 SIGNATURE OR NAME OF ADDRESSEE (Must always be filled in)

CERTIFIED NO. SIGNATURE OF ADDRESSEE'S AGENT, IF ANY

INSURED NO. SIGNATURE OF ADDRESSSEE'S AGENT, IF ANY

DATE DELIVERED 2469 SHOW WHERE DELIVERED (only if requested)

655-16-71548-10 GPO

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INSURED NO. SIGNATURE OF ADDRESSSEE'S AGENT, IF ANY

DATE DELIVERED JAN 22 1969 SHOW WHERE DELIVERED (only if requested)

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REGISTERED NO. 24992 SIGNATURE OR NAME OF ADDRESSEE (Must always be filled in)

CERTIFIED NO. 1 SIGNATURE OF ADDRESSEE'S AGENT, IF ANY

INSURED NO. 2 SHOW WHERE DELIVERED (only if requested)

DATE DELIVERED 25-69

3

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REGISTERED NO. 2581 SIGNATURE OR NAME OF ADDRESSEE (Must always be filled in)

CERTIFIED NO. 1 SIGNATURE OF ADDRESSEE'S AGENT, IF ANY

INSURED NO. 2 SHOW WHERE DELIVERED (only if requested)

DATE DELIVERED JAN 24

3

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INSURED NO. 2 SHOW WHERE DELIVERED (only if requested)

DATE DELIVERED

3

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REGISTERED NO. 24933 SIGNATURE OR NAME OF ADDRESSEE (Must always be filled in)

CERTIFIED NO. 1 SIGNATURE OF ADDRESSEE'S AGENT, IF ANY

INSURED NO. 2 SHOW WHERE DELIVERED (only if requested)

DATE DELIVERED 1-24-69

3

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RECEIPT

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REGISTERED NO. 2499 SIGNATURE OR NAME OF ADDRESSEE (Must always be filled in)

CERTIFIED NO. 1 SIGNATURE OF ADDRESSEE'S AGENT, IF ANY

INSURED NO. 2 SHOW WHERE DELIVERED (only if requested)

DATE DELIVERED JAN 24 1969

3

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REGISTERED NO. 2495 SIGNATURE OR NAME OF ADDRESSEE (Must always be filled in)

CERTIFIED NO. 1 SIGNATURE OF ADDRESSEE'S AGENT, IF ANY

INSURED NO. 2 SHOW WHERE DELIVERED (only if requested)

DATE DELIVERED

3

RECEIPT

Received the numbered article described below.

REGISTERED NO. 2505 SIGNATURE OR NAME OF ADDRESSEE (Must always be filled in) Donahy Miller

CERTIFIED NO. _____ SIGNATURE OF ADDRESSEE'S AGENT, IF ANY _____

INSURED NO. _____

DATE DELIVERED JAN 27 1969 SHOW WHERE DELIVERED (only if requested) _____

655-16-71548-10 GPO

INSTRUCTIONS TO DELIVERING EMPLOYEE

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RECEIPT

Received the numbered article described below.

REGISTERED NO. 2408 SIGNATURE OR NAME OF ADDRESSEE (Must always be filled in) Mr. Richard Hall

CERTIFIED NO. _____ SIGNATURE OF ADDRESSEE'S AGENT, IF ANY _____

INSURED NO. _____

DATE DELIVERED 1-24-69 SHOW WHERE DELIVERED (only if requested) _____

655-16-71548-10 GPO

INSTRUCTIONS TO DELIVERING EMPLOYEE

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RECEIPT

Received the numbered article described below.

REGISTERED NO. 2450 SIGNATURE OR NAME OF ADDRESSEE (Must always be filled in) B. Smeltling

CERTIFIED NO. _____ SIGNATURE OF ADDRESSEE'S AGENT, IF ANY W. Suter

INSURED NO. _____

DATE DELIVERED JAN 24 1969 SHOW WHERE DELIVERED (only if requested) _____

655-16-71548-10 GPO

RECEIPT

Received the numbered article described below.

REGISTERED NO. 2500 SIGNATURE OR NAME OF ADDRESSEE (Must always be filled in) M. Stephens

CERTIFIED NO. _____ SIGNATURE OF ADDRESSEE'S AGENT, IF ANY _____

INSURED NO. _____

DATE DELIVERED 1-25-69 SHOW WHERE DELIVERED (only if requested) _____

655-16-71548-10 GPO

INSTRUCTIONS TO DELIVERING EMPLOYEE

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RECEIPT

Received the numbered article described below.

REGISTERED NO. 2503 SIGNATURE OR NAME OF ADDRESSEE (Must always be filled in) Theresa ...

CERTIFIED NO. _____ SIGNATURE OF ADDRESSEE'S AGENT, IF ANY _____

INSURED NO. _____

DATE DELIVERED 1-25-69 SHOW WHERE DELIVERED (only if requested) _____

655-16-71548-10 GPO

INSTRUCTIONS TO DELIVERING EMPLOYEE

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RECEIPT

Received the numbered article described below.

REGISTERED NO. 2502 SIGNATURE OR NAME OF ADDRESSEE (Must always be filled in) Phillips Inv. Corp.

CERTIFIED NO. _____ SIGNATURE OF ADDRESSEE'S AGENT, IF ANY M. Stephens

INSURED NO. _____

DATE DELIVERED 1/27/69 SHOW WHERE DELIVERED (only if requested) _____

655-16-71548-10 GPO

(Additional charges required for these services)

RECEIPT

Received the numbered article described below.

REGISTERED NO. 2487

CERTIFIED NO. James McHenry

INSURED NO.

DATE DELIVERED JAN 28 1969

SHOW WHERE DELIVERED (only if requested)

655-16-71548-10 GPO

INSTRUCTIONS TO DELIVERING EMPLOYEE

Show to whom, date, and address where delivered to addressee (Additional charges required for these services)

RECEIPT

Received the numbered article described below.

REGISTERED NO. 2487

CERTIFIED NO. Donald M. Phillips

INSURED NO.

DATE DELIVERED 1/28/69

SHOW WHERE DELIVERED (only if requested)

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INSTRUCTIONS TO DELIVERING EMPLOYEE

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REGISTERED NO. 2490

CERTIFIED NO. Donald M. Phillips

INSURED NO.

DATE DELIVERED 1/28/69

SHOW WHERE DELIVERED (only if requested)

655-16-71548-10 GPO

(Additional charges required for these services)

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Received the numbered article described below.

REGISTERED NO. 2540

CERTIFIED NO. Sand McCarty

INSURED NO.

DATE DELIVERED FEB 7 1968

SHOW WHERE DELIVERED (only if requested)

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REGISTERED NO. 2541

CERTIFIED NO. Deatrice McDonald

INSURED NO.

DATE DELIVERED FEB 6 1968

SHOW WHERE DELIVERED (only if requested)

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Received the numbered article described below.

REGISTERED NO. 2584

CERTIFIED NO. John Henry Lewis

INSURED NO.

DATE DELIVERED 1/29/69

SHOW WHERE DELIVERED (only if requested)

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REGISTERED NO. <i>2495</i>	1	SIGNATURE OR NAME OF ADDRESSEE <i>(Must always be filled in)</i> <i>Bob Crosby</i>
CERTIFIED NO.		SIGNATURE OF ADDRESSEE'S AGENT, IF ANY
INSURED NO.	2	_____
DATE DELIVERED <i>1/30/69</i>	3	SHOW WHERE DELIVERED <i>(Only if requested)</i> _____

c55-16-71548-10 GPO

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REGISTERED NO. <i>2494</i>	1	SIGNATURE OR NAME OF ADDRESSEE <i>(Must always be filled in)</i> <i>Mrs. Thelma Crosby</i>
CERTIFIED NO.		SIGNATURE OF ADDRESSEE'S AGENT, IF ANY
INSURED NO.	2	_____
DATE DELIVERED <i>2-5-69</i>	3	SHOW WHERE DELIVERED <i>(only if requested)</i> _____

c55-16-71548-10 GPO