DISTRIBUTION SANTA FE OIL CONSERVATION DIVISION P. O. BOX 2088

	FILE SANTA FE, NEW MEXICO 87501						
	U.S.U.S. LAND OFFICE TRANSPORTER OIL	REQUEST FOR ALLOWABLE					
	PROPATION OFFICE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS						
	APACHE CORPORATION						
	Address 1700 LINCOLN, #4900, DENVER, COLORADO 80203-4549						
	Reason(s) for filing (Check proper box) Other (Please explain)						
	New Well						
	Recompletion						
	Change in Ownership X	Casinghead Gas Cond	lensate				
	If change of ownership give name and address of previous owner Cotton Petroleum Corporation, 3773 Cherry Creek Drive No., #750, Denver Colorado 80209						
11.	DESCRIPTION OF WELL AND				Colorado	80209	
	Lease Name	Well No. Pool Name, Including		Kind of Leas		Lease No	
	APACHE Location	152 LINDRITH GA	ALLUP-DAKOTA	W. State, Federa	al or Fee FEDERAL	126	
	Unit Letter E 200	001 Feet From The North	ine and 610	Feet From	The West		
	Line of Section 12 To	ownship 24N Range	ATA		ARRIBA		
				IAMILM,		County	
III.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil 3 or Condensate Address (Give address to which approved copy of this form is to be sent)						
	GIANT REFINING COMPANY		P.O. BOX 256 - FARMINGTON, NM 87499				
	Name of Authorized Transporter of Casinghead Gas 🗴 or Dry Gas		Address (Give address to which approved copy of this form is to be sent)				
	EL PASO NATURAL GAS		P.O. BOX 1492 - EL PASO, TX 79978				
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	is gas actually co		en		
	If this production is commingled w	ith that from any other lease or pool,					
	COMPLETION DATA	Cil Well Gas Well					
	Designate Type of Completi		inem well woll	cover Deepen	Plug Back Same Res	i'v. Diff. Res	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth		
	Perforations			Depth Casing Shoe			
		D CEMENTING RECORD		1			
	HOLE SIZE CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT		
			-				
							
į			. i				
	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top alic able for this depth or be for full 24 hours)						
	Date First New Oil Run To Tanks			Producing Method www, sump, gas lift, etc.,			
	Length of Test	Tubing Pressure	Casing Pressure		Choke Size		
	Actual Prod. During Test	Oil-Bbis.	Water-Bbls.	661	Gas - MOF		
				UIS CONTRACTOR	UIV.		
	GAS WELL Actual Prod. Test-MCF/D Length of Test		DioT. 3		Company of Contract		
	Actual Pida. 1981-MCF/D	Length of Leat	Bhis. Condensate,	MMCF	Gravity of Condensate		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION DIVISION				
1	hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given bove is true and complete to the best of my knowledge and belief.		APPROVED				
Ī			By Srank J. Jave				
-			SUPERVISOR DISTRICT				
	David M. Sellatt		TITLE This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepene well, this form must be accompanied by a tabulation of the deviatic tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow				
-							
_	(proton mon						

able on new and recompleted wells.

Fill out only Sections I. II. III, and VI for changes of owne-well name or number, or transporter, or other such change of condition

Separate Forms C-104 must be filed for each pool in multiple completed wells.