

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

WELL NO.	
LEASER	
OPERATOR	
TRANSPORTER	
REGISTRATION OFFICE	

APOLLO ENERGY, INC.

P. O. BOX 5315, HOBBS, NEW MEXICO 88241

Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership <input checked="" type="checkbox"/>	EFFECTIVE DATE MARCH 17, 1983
Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

Name of ownership give name
Address of previous owner: Amaro Production Company, P. O. Box 68, Hobbs, NM 88240

Well Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
WASLEY	6	CATO SAN ANDRES	State, Federal or Fee FEE	
Location	Unit Letter F 1980 Feet From The NORTH Line and 1980 Feet From The WEST			
Line of Section	Township	Range	NMPM	County
14	8	30		CHAVES

Designation of Transporter of Oil and Natural Gas		Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Mobil Pipeline Co. Proration Department	P. O. Box 900, Dallas, Texas 75221	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Cities Service Oil Company	P. O. Box 4906, Midland, Texas 79702	
Well produces oil or liquids, or both <input type="checkbox"/>	Unit	Sec.	Twp.
Is gas actually connected? <input type="checkbox"/>			Rge.

If this production is commingled with that from any other lease or pool, give commingling order number:

Designate Type of Completion - (X)	Oil well	Gas well	New Well	Workover	Deepen	Plug Back	Same Heist	Diff. Heist
Appended	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Locations (DF, RNB, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Locations					Depth Casing Shoe			

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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 allowable for this depth or be for full 24 hours)			
Oil Prod. New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Kind of Test	Tubing Pressure	Casing Pressure	Choke Size
Oil Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

Oil Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Flow Method (prior, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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 herein is true and complete to the best of my knowledge and belief.

John J. Merchant
(Signature)
Vice President
(Title)

OIL CONSERVATION DIVISION

APPROVED **MAR 30 1983**, 19

BY **ORIGINAL SIGNED BY EDDIE SEAY**

TITLE **OIL & GAS INSPECTOR**

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 division tests taken on the well in accordance with RULE 111.

All portions of this form must be filled out completely for all wells on new and recompleted wells.

RECEIVED
MAR 29 1983
S.S.D.
HOUSE OFFICE