

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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	GAS
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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501Form C-104
Revised 10-01-78
Format 06-01-83
Page 1REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator APOLLO ENERGY, INC.	
Address P. O. Box 5315, Hobbs, New Mexico 88241	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well	Effective 5/1/84
<input type="checkbox"/> Recompletion	
<input checked="" type="checkbox"/> Change in Ownership	
Change in Transporter of:	
<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate

If change of ownership give name and address of previous owner AMOCO PRODUCTION COMPANY, P. O. Box 68, Hobbs, New Mexico 88240

II. DESCRIPTION OF WELL AND LEASE

Lease Name FEDERAL "A"	Well No. 7	Pool Name, including Formation BOUGH DEVONIAN	Kind of Lease State, Federal or Fee Fed.	NM Lease No. 0450847
Location				
Unit Letter <u>K</u> ; <u>2005</u> Feet From The <u>South</u> Line and <u>1873</u> Feet From The <u>West</u>				
Line of Section <u>13</u> Township <u>9S</u> Range <u>35E</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"/> MOBIL PIPELINE CORP. (PRORATION DEPT.)	Address (Give address to which approved copy of this form is to be sent) P. O. Box 900, Dallas, Texas 75221	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 13
	Twp. 9	Rqs. 35
	Is gas actually connected? No	When

If this production is commingled with that from any other lease or pool, give commingling order number: CTB-149

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.


(Signature)
President
(Title)
May 3, 1983
(Date)

OIL CONSERVATION DIVISION
APPROVED MAY 4 1984, 19
BY Eddie W. 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 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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HOBBS OFFICE