

OIL CONSERVATION DIV. ON

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES DESIRED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	NAT
OPERATION	
PRODUCTION OFFICE	

I. Operator  
Apache Corporation  
Address  
7666 East 61st, 500 Triad Center, Tulsa, Ok. 74133-1201  
Reason(s) for filing (Check proper box) Other (Please explain)  
New Well ☐ Change in Transporter of: Oil ☒ Dry Gas ☐  
Recompletion ☐ Casinghead Gas ☐ Condensate ☐ Effective 12/1/86  
Change in Ownership ☐

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE  
Lease Name Paul Well No. 1 Pool Name, including Formation W. Milnesand - 817 Kind of Lease State, Federal or Fee State Lease No.  
Location  
Unit Letter I : 1980 Feet From The South Line and 660 Feet From The East  
Line of Section 17 Township 8S Range 34E, NMPM, Roosevelt County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil ☒ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent)  
Koch Services Inc. P.O. Box 1558 Breckinridge, Tx. 76024  
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent)  
Warren Petroleum Company P.O. Box 1589 Tulsa, Oklahoma 74102  
If well produces oil or liquids, give location of tanks. Unit I Sec. 17 Twp. 8S Rge. 34E Is gas actually connected? Yes When 10-26-81

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

IV. COMPLETION DATA  
Designate Type of Completion - (X) Oil Well X Gas Well New Well Workover Deepen Plug Back Same Res'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  
TUBING, CASING, AND CEMENTING RECORD  
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (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)  
Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)  
Length of Test Tubing Pressure Casing Pressure Choke Size  
Actual Prod. During Test Oil-Bbls. Water-Bbls. Gas-MCF

GAS WELL  
Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MCF Gravity of Condensate  
Testing Method (pistol, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size

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 above is true and complete to the best of my knowledge and belief.  
Connie Jones (Signature)  
Production Clerk (Title)  
2/10/87 (Date)  
OIL CONSERVATION DIVISION  
FEB 17 1987  
APPROVED  
ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR  
TITLE  
This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the device tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for all able on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of ownership name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filled for each pool in multi-completed wells.

RECEIVED  
FEB 13 1987  
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HOBBS OFFICE