ENERGY AND MINERALS DEPARTMEN	NŢ							Form C 104	
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DISTRIBUTION	OIL CONSERVATION DIVISION						Format 06-0 Page 1	1 83	
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PILE	54	NTA F	E NEW	MEXI	CO 87501				
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TRANSPORTER DAS		REQUI	EST FOR	ALLOW	ABLE				
OPERATOR			4A	ND		•			
PROBATION OFFICE	AUTHORIZA	TION TO	TRANSP	PORT OIL	AND NATUR	RAL GAS			
l. Operator							·····		<u> </u>
KELT OIL & GAS, I	INC.				· · · · · · · · · · · · · · · · · · ·				
Address P.O. Box 1493, Ros	well, New Me	xico 88	3201						
Resson(s) for filing (Check proper box					Other (Please	esplain)			
New Well	Change in Tra	naporter of	:						
		• • • • • • • • •	-	y Gas	Februr	ary 2, 19	99		
Recompletion	24			ndensate	rebrua	ary 2, 19	50		
X Change in Ownership	Casinghed								
If change of ownership give name	• • • •	Ŧ	n o r					0000	
and address of previous owner	Apollo Energ	y, inc.,	P.0. E	30x 809	(, Koswel	I, NEW M	exico	88201	
II. DESCRIPTION OF WELL AN	Well No. Poo	I Name, Inc	cluding Fo	ormation	T	Kind of Leas	•		Logae
		•		n Andr	294	State, Federa	l or Fee	Fee	
UT Crosby 1	· 5			<u> </u>				100	L
Line of Section 9 To	waship 85	Ra	ange	30E .	, NMPM,	·	Chav	es	Cou
III. DESIGNATION OF TRANS	PORTER OF OIL	AND NA	TURAL	GAS					
Name of Willing and Transporter of Oil	1 Xi or Conde	naalo 🗖		Andress (Cive address to	which appro	ved copy o	f this form is s	
				1	••••				o be seni)
		-Den t.			-Box 900,	Dallas, 1	'exas		
Le Mobili Pipeline Co.	Proration	or Dry Gas				Dallas, 1	'exas		
Name of Authorized Transporte: of Ca	Proration Leinghead Gae (X)	or Dry Gas	0	Address (Box 900, Cive address sc	Dallas, 1 which appro	exas		
Le Mobili Pipeline Co.	Proration Minghead Cae (X) 3 L. Inc.	or Dry Gas		Address (Box 3	Box 900, Cive address 10 300, Tulsa,	Dallas, 1 which appro Okla, 7	'exas ved copy o 4102		
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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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IV. COMPLETION DATA

Designate Type of Completio	on - (X)	011 Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Restv.	Diff. Res'v.
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, ANI	CEMENTI	NG RECOR	D	<u></u>		
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT			
	<u> </u>			<u> </u>		·····		·····	
	1			1					

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to ar exceed top allow-OIL WELL able 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 Teet	Oil-Bbis.	Water - Bble.	Gas-MCF	
i				

GAS WELL

Actual Prod. Test-MCF/D	Longth of Test	Bble. Condensate/MMCF	Gravity of Condensate
Teeting Method (pitot, back pr.)	Tubing Pressure (Shut-im)	Casing Pressure (Shut-im)	Choke Size