

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-1-78

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REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GASAPOLLO ENERGY, INC.
Address

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

Reason(s) for filing (Check proper box)

New Well ☐Recompletion ☐Change in Ownership ☒

Change in Transporter of:

Oil ☐Coasthead Gas ☐Dry Gas ☐Condensate ☐

Other (Please explain)

EFFECTIVE DATE MARCH 17, 1983

change of ownership give name

and address of previous owner Amoco Production Company, P. O. Box 68, Hobbs, NM 88240

DESCRIPTION OF WELL AND LEASE

井名	GRIMM FEDERAL	井号	1	Pool Name, Including Formation	CATO SAN ANDRES	Kind of Lease	State, Federal or Fee	FEDERAL	Lease No.	NM0354427A
Location										
Unit Letter	0	660	Feet From The	SOUTH	Line and	1980	Feet From The	EAST		
Line of Section	9	Township	8	Range	30	NMPM,	CHAVES	County		

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)
Mobil Pipeline Co. Proration Department	P. O. Box 900, Dallas, Texas 75221
Name of Authorized Transporter of Gashead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
Cities Service Oil Company	P. O. Box 4906, Midland, Texas 79702
Is well produces oil or liquids, or location of tanks.	Is gas actually connected? When

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Some Rest.	Diff. Rest.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Revisions (DF, RAS, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Revisions						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)

井名	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Initial Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

FLOW TEST

Initial Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Flowing 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 here is true and complete to the best of my knowledge and belief.

DIVISION

Upshaw, John Merchant
(Signature)

Vice President

(Title)

March 17, 1983

(Date)

OIL CONSERVATION DIVISION

MAR 30 1983

APPROVED _____, 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 previous 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 Form C-104 must be filed for each pool in multiple completed wells.

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RECEIVED
MAR 29 1983
O.C.D.
HOBBS OFFICE