

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

APOLLO ENERGY, INC.

Address

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

Location(s) for filing (Check proper box)

New Well ☐Recompletion ☐Change in Ownership ☒

Change in Transporter of:

Oil ☐Casinghead Gas ☐Dry Gas ☐Condensate ☐

Other (Please explain)

EFFECTIVE DATE MARCH 17, 1983

Change of ownership give name

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

DESCRIPTION OF WELL AND LEASE

Lease Name CORSBY H	Well No. 1	Pool Name, Including Formation CATO SAN ANDRES	Kind of Lease State, Federal or Fee FEE	Lease No.
Location				
Unit Letter E	1980	Feet From The NORTH	Line and 660	Feet From The WEST
Line of Section 9	T. 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 Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
Civies Service Oil Company	P. O. Box 4906, Midland, Texas 79702
Well produces oil or liquids, ☐ or gas ☐	Is gas actually connected? ☐ When
Location of tanks	

If 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 ☐	Same Res'ty. ☐	Diff. Res'ty. ☐
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Locations (DF, RLS, 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
NEW 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)

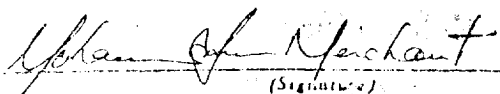
First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Depth of Test	Tubing Pressure	Casing Pressure	Choke Size
Well Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

NEW WELL

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



Vice President

(Title)

March 17, 1983

(Date)

OIL CONSERVATION DIVISION

MAR 30 1983

APPROVED _____, 19

ORIGINAL SIGNED BY EDDIE SEAY

BY

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 gravity 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 change of ownership, well name or number, or transporter, or other such change of condition.

Separate Form C-104 must be filed for each pool in multiple completions.

0391 41 11 11

RECEIVED

MAR 29 1983

**O.C.D.
HOBBS OFFICE**