

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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N.E.D.A.	
LAND OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 05-01-83
Page 1

REQUEST 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)

☐ New Well	☐ Change in Transporter of:	Other (Please explain)
☐ Recombination	☐ Oil	Change of well name
☒ Change in Ownership	☐ Condensate Gas	Effective May 1, 1986
	☐ Dry Gas	
	☐ Condensate	

If change of ownership give name and address of previous owner: **Union Texas Petroleum Corp., 1300 Wilco Bldg., Midland, Texas 79701**

II. DESCRIPTION OF WELL AND LEASE

Lease Name (State, Federal or Fee)	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
UT (Union Texas) Federal	2	Cato (San Andres)	Federal	NM0155494

Location

Section **A** : **660** Feet From The **North** Line and **660** Feet From The **East** Line of Section **9** Township **8-S** Range **30-E** , **NMPL** , **Chaves** 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)
Mobil Pipe Line Company	Box 900 Dallas, Texas 75221
Name of Authorized Transporter of Condensate Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
Oxy Cities Service NGL, Inc.	P. O. Box 300 Tulsa, Okla 74102
If well produces oil or liquids, give location of tanks.	In gas actually connected? When
H 9 8-S 30-E	Yes NA

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

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.

Betty Swafford
(Signature)

Administrative Assistant

(Title)

May 9, 1986

(Date)

OIL CONSERVATION DIVISION

APPROVED **MAY 14 1986** , 19

BY **ORIGINAL SIGNED BY JERRY SEXTON**
TITLE **DISTRICT I SUPERVISOR**

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 multiple completed wells.