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STATE OF NEW MEXICO				
ENERGY AND MINERALS DEPARTMENT				Form C-104
20. 89 CB9448 STCTIVEP				Revised 10-01-78 Format 06-01-83
	SERVAT	TION DIVISIO	N	Page 1
	P. O. BOX	2088		
VILE SANTA F	E, NEW	MEXICO 87501		
LAND OFFICE				
TRANSPORTER OIL		_		
CAE REQU		ALLOWABLE		
OPERATOR	AN	-		
AUTHORIZATION TO) TRANSPO	ORT OIL AND NATU	RAL GAS	
1.				
Operator				
Apollo Energy, Inc.				
Address				
P. O. Box 5315 Hobbs, New Me	xico 88	241		
Reason(s) for filing (Check proper bos)		Other (Please	e exploin)	
New Well Change in Transporter	of:			
Recompletion Q Oil	🗌 Бту	Gam Effect	ive March 1, 3	1987
Change in Ownership Casinghead Gas	. 🚺 Com	densale		
If change of ownership give name				
and address of previous owner				
II. DESCRIPTION OF WELL AND LEASE	Including For	rmation	Kind of Lease	Lease No.
Lease None	San And		State, Federal or Fee	Federal NM027622
Brown, Federal			<u> </u>	() ()
Location				West
Unit Letter D : 660 Feet From The Not	rth_Line	and 660	Feet From The	nçat
				Chaves County
Line of Section 26 Township 85	Range 3	OE , NMPN	И,	<u>Cliaves</u> <u>county</u>
III. DESIGNATION OF TRANSPORTER OF OIL AND M	<u>NATURAL</u>	GAS	the barrent com	y of this form is to be sent)
Name of Authorized Transporter of Oll S or Condensate	ן כ	Addiess (Other applicate		
Pride Pipeline Corporation		P. O. Box 3	237 Abilene,	Texas 79604
Name of Authorized Transporter of Casinghead Gas X or Dry C	jas 🗌			y of this form is to be sent)
Oxy Cities Service NGL, Inc.		P. O. Box 4	1906 Midland,	Texas 79702
Unit Sec. Twp.	Rge.	is gas actually connec	ted? When	
If well produces oil or liquids,	30	Yes	1 7	-30-68
Give tocotton of tonias.		in an include order	er number:	TB-174
If this production is commingled with that from any other least	se or pool, p	give comminging ord		
NOTE: Complete Parts IV and V on reverse side if neces				
NOIE: Complete Faris IV and V on reverse size of	· · ·			D1 40001
VI. CERTIFICATE OF COMPLIANCE			CONSERVATION	
			SFR 1	98/
I hereby certify that the rules and regulations of the Oil Conservation D	ivision have	APPROVED		, 18
been complied with and that the information given is true and complete it	o the best of			۲
my knowledge and belief.		Eddie	W. Seay	
	- [TITLEQIL & G	as Inspector	
Mohammed Yamin Merchant				
	´	This form is t	to Ls (i)ed in compli	ance with RULE 1104.
ipi of ht		If this is a re	quest for allowable i at he accompanied h	for a newly drilled or deepend by a tabulation of the deviation
(Signolwe)		tests taken on the	well in accordance	WITH AULE 111.
President		All sections of	of this form must be	filled out completely for allow
(Title)		able on new and r	ecompisted wells.	
February 12, 1987	This are only sections I II III and VI for changes of owned			
(Daie)	well name or number, or transporter, or other auch change of condition Separate Forms C-104 must be filed for each pool in multipl			
		Separate Form completed wells.	ms C-104 must be f	nes for each boot in umfib
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		-		bs

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