

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 875010 + 4 NMOCB Hobbs
1 FileREQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

APOLLO ENERGY, INC.

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 ☒ Dry Gas ☐
Casinghead Gas ☐ Condensate ☐

Other (Please explain)

Effective
January 1, 1984
7:00 A.M.Change of ownership give name
and address of previous owner ARCO OIL & GAS COMPANY P.O. Box 1710, Hobbs, New Mexico 88240

DESCRIPTION OF WELL AND LEASE

Well Name Winkler Federal Well No. 1 Pool Name, Including Formation Cato San Andres Kind of Lease State, Federal or Fee Federal Lease No.

Location Unit Letter P : 660 Feet From The South Line and 660 Feet From The East

Line of Section 29 Township 8S Range 30E NMCM, Chaves County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐

Permian Corporation

Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐

Cities Service Oil Company

Well produces oil or liquids,
give location of tanks.

Unit M Sec. 28 Twp. 8S Rge. 30E

Address (Give address to which approved copy of this form is to be sent)

P.O. Box 1183, Houston Texas 77001
Address (Give address to which approved copy of this form is to be sent)

Box 300, Tulsa, Okla. 74102

Is gas actually connected? When

yes 8-17-68

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 Revs. Diff. Rev.
Date completed Date Compl. Ready to Prod. Total Depth P.B.T.D.
Locations (DF, RAB, RT, CR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth
Perforations Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL(Test must be after recovery of total volume of load oil and must be equal to or exceed top oil
able for this depth or be for full 24 hours)

Initial Flow 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 Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Producing Method (flow, back prod.)	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
above is true and complete to the best of my knowledge and belief.OIL CONSERVATION DIVISION
JAN 4 1984

APPROVED _____, 19

BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

TITLE _____

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deeper
well, this form must be accompanied by a tabulation of the device
tests taken on the well in accordance with RULE 111.All sections of this form must be filled out completely for all
wells on new and recompleted wells.Fill out only Sections I, II, III, and VI for changes of own
well name or number, or transporter, or other such change of condition.Separate Form C-104 must be filed for each pool in multi
completed wells.Vice President
(Title)December 30, 1983
(Date)

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