

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator APOLLO ENERGY, INC.	
Address P.O. BOX 8097 ROSWELL, NEW MEXICO 88201	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate
EFFECTIVE 1-SEP-87	

If change of ownership give name and address of previous owner: QUANICO OIL & GAS P.O. BOX 1714 ELDORADO AR. 71730

II. DESCRIPTION OF WELL AND LEASE

Lease Name WOODMAN FEDERAL	Well No. 3	Pool Name, including Formation CATO (SAN ANDRES)	Kind of Lease State, Federal or Fee FEDERAL	Lease No. NM-0346362
Location				
Unit Letter H	1980	Feet From The NORTH	Line and 660	Feet From The EAST
Line of Section 29	Township 8S	Range 30E	, NMPM, CHAVES County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> PERMIAN	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 1183, HOUSTON, TX 77001	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> CITIES SERVICE	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 300 TULSA, OK. 74102	
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 28
	Twp. 8S	Rge. 30E
Is gas actually connected?	When 8/13/68	YES

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.

*Andrew Z. Prestidge*  
(Signature)

*Paul Eng*  
(Title)

*7 OCT 87*  
(Date)

OIL CONSERVATION DIVISION

APPROVED 001 13 1987, 19

BY Orig. Signed by

Paul Kautz

TITLE Geologist

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 multiply completed wells.