STATE OF NEW MEXICO CHGY AND MINERALS DEPARTMENT

THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF			
			l
COLD MINUTED	_		
SANTA FE			
FILE	_	_	
u 4.u.t.			
LAND OFFICE			
TAAHIPDATER			
QAB	_		
OPERATOR			
PROBATION OFFICE		لبيا	L
Contract of the contract of th			

OIL CONSERVATION DIVISION

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

0 + 4 NMOCD Hobbs

File

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS APOLLO ENERGY, INC. P.O. Box 5315, Hobbs, New Mexico 88241 Reason(s) for liling (Check proper box) Other Please exclusal Effective. Change in Transporter of: Dry Gos January 1,1984 Chi Recompletion Change in Ownership 7:00 A.M. Condensale Cosinghead Gas If change of ownership give name and address of previous owner ____ ARCO OIL & GAS COMAPANY P.O. BOX 1710, Hobbs, New Mexico 88240 DESCRIPTION OF WELL AND LEASE Lease N Kind of Leuse ell No. Pool Name, Including Formation State, Federal or Fee 11 Fuderal Winkler Federal Cato San Andres Localion : 1980 Feet From The North Line and 1980 Feet From The West , NMPM, Chaves Count 32 Range 30E T mahip 8S Line of Section DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Andress (Give address to which approved copy of this form is to be sent) se of Authorized Transporter of CII P.O. Box 1183 Houston Texas 77001
Address (Give address to which approved copy of this form is to be sent) Permian Corporation Name of Authorized Transporter of Casinghead Gas X or Dry Gas Box 300, Tulsa, Okla, 74102 Cities Service Oil Company Twp. Hqe. If well produces oil or liquids, М ! 28 130E 8S 8-17-68 If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Designate Type of Completion - (X) Plug Back Same Resty. Dill. He Deepen Workover Gas Well New Well P.B.T.D. Date Compl. Ready to Prod. Total Depth Date Spudded Tubing Depih Top Oil/Gas Pay Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) Depth Castrig Shoe Perforations TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE (Test must be ofter recovery of total volume of load oil and must be equal to or exceed top al. TEST DATA AND REQUEST FOR ALLOWABLE able for this depth or be for full 24 hours? OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Chote Size Casing Preseure Tubing Pressure Length of Test Gas-MCF water - bble. OII - BMe. Actual Prod. During Test GAS WELL Gravity of Condensate Bate. Condensate/MMCF Actual Frod. Teet-MCF/D Length of Test Chose Siss Cosing Pressure (Lhut-18) Teating Method (pitot, back pr.) Tubing Pressure (Shut-in) DIL CONSERVATION DIVISION CERTIFICATE OF COMPLIANCE JAN 4 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. ORIGINAL SIGNED BY JERRY SEXTON BY... DISTRICT I SUPERVISOR TITLE . This form is to be filed in compliance with rul E 1104, Speak Spirit ferchant If this is a request for allowable for a newly drilled or deep a well, this form must be accompanied by a telepistion of the deviations taken on the well in accordance with MULE 111. All sections of this form must be filled out conpletely for al. Vice President

December 30,1983

(Dute)

able on new and recompleted walls.

Fill out only factions 1 II, III, and VI for charges of owwell name or number, or transporter, or other anch charge of condi-

Beparate homes C-104 must be filled for each pool in multi-transferred wells.