JY AND MINICHALS DEPARTMENT DI 107-11 011-1110 COLLEGERION OSTRIBUTES OSTAFR ILT /A.O.S. AND OFFICE RANSPORTER OSL OAS

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

REQUEST FOR ALLOWABLE AND ANTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

PERATION DEFICE	AUTHURIZATION TO TRANS	PORT OIL AND NATURAL GA	1.3
Apollo Energy, Inco	rporated		
.ddress			
P. O. Box 5315, Hobb	bs, New Mexico 88241	Other (Please explain	· · · · · · · · · · · · · · · · · · ·
iew Well	Change in Transporter of:	FRECTIV	E DATE DECEMBER 30, 1982
tecompletion	Oil Dry Go Casinghead Gas Conde	HI \	E MIL BESILIBER 30, 1901
hange in Ownership XX		, and the second	
change of ownership give name id address of previous owner	Shell Oil Company, P. O.	Box 991, Houston, Te	exas 77001
ESCRIPTION OF WELL AND) LEASE: Well No. Pool Name, Including F	ormation Kind of	Leane Leane No.
Hodges A Federal	6 Cato San Andr	Ces State, F	** Federal NM022636
Unit Letter D : 66	Feet From The North Lir	ne and 660 Feet I	From The West
Line of Section 27	whatip 8S Range	30E , NMPM,	Chaves County
ESIGNATION OF TRANSPOR	RTER OF OIL AND NATURAL GA	1S	
Mobil Oil Company		Address (Give address to which	DAUAS 7522/ Midland, Texas 79702
ione of Authorized Transporter of C		Address (Give address to which	approved copy of this form is to be sent)
Cities Service Oil (Company Unit Sec. Twp. Rge.	P. O. Box 4906.	Midland, Texas 79702
l well produces oil or liquide, ive location of tanks.	D 27 8S 30E	Yes	8-15-68
	with that from any other lease or pool,	give commingling order number	: CTB-176
OMPLETION DATA Designate Type of Complete	ion - (X) Gas Well	New Well Workover Deepe	n Plug Back Same Resty, Diff, Resty
ote Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
die Spadou	,		Tubing Depth
lovations (DF, RKB, RT, GR, etc.)	Name of Freducing Formation	Top Oll/Gas Pay	Tubing Deptil
erforations			Depth Casing Shoo
	TUBING, CASING, AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
			:
EST DATA AND REQUEST I	FOR ALLOWABLE (Test must be a able for this de	fier recovery of total volume of loa pih or be for full 24 hours)	d oil and must be equal to or exceed top allow
IL WELL, ate First New Oil Bun To Tonks	Date of Test	Producing Method (Flow, pump,	gas lift, etc.)
ength of Test	Tubing Pressure	Coming Pressure	Choke Size
ctual Prod. During Test	Cil-Bilo.	Water-Bbls.	Gas-MCF
'S WELL			Gravity of Consensate
ctual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	·
esting Method (pirot, back pr.)	Tubing Pressure (Shut-in)	Cosing Fiesaue (shot-in)	Chore Size
ENTIFICATE OF COMPLIAN	RCE .	11	IVATION DIVISION 13 1983 19
vereby certify that the rules and	regulations of the Oil Conservation	II APPROVED	
vision have been complied with and that the information given ove is true and complete to the best of my knowledge and belief.		ORIGINAL IERRY	SIGNED BY
		TITLEDISTRIC	T 1 SUPR
		This form is to be filed	i in compliance with RULE 1101,
Yokam You Marchant		If this is a request for allowable for a newly drilled or despens- well, this form must be accompanied by a tabulation of the deviation	
(Sig	natur)	that a taken on the well in	BCCOLDUIDED MILLI MILLE ILLE
VICE PRESIDENT		All soctions of this form must be filled out completely for allow able on new and recompleted walls.	
JANUARY 7, 198	Alia)	well name or number, or tren	I. H. III, and VI for changes of countries aportunes of other such change of countries
. (1	· w, * /	11	must be filed for each pool in multiple

Separate 1 orms C-104 must be filled for each pool in multiple completed wells.

JAN 12 1983
JAM 6 D 1983
HOBBS DEFICE