

STATE OF NEW MEXICO
OIL AND GAS DEPARTMENT
REGISTRATION
CLASSIFICATION
TAXES
TYPE
VEHICLE
LAND OFFICE
TRANSPORTER
OPERATION
REGISTRATION OFFICE
Operator

OIL CONSERVATION DIVISION
P. O. BOX 7088
SANTA FE, NEW MEXICO 87504

Form C-104
Revised 10-1-78

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

APOLLO ENERGY, INC.

Address
P. O. BOX 5315 HOBBS, NEW MEXICO 88241

Section(s) for filing (check proper box)	Other (Please explain)	
New Well ☐	Change in Transporter of:	
Recompletion ☐	Oil ☒ Dry Gas ☐	Effective October 1, 1983
Change in Ownership ☐	Casinghead Gas ☐ Condensate ☐	

(Change of ownership give name
and address of previous owner)

DESCRIPTION OF WELL AND LEASE

Lease Name CATO C FEDERAL	Well No. 3	Pool Name, Including Formation Cato San Andres	Name of Lease State, Federal or Free FEDERAL	Lease No. NM0444628
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Location
Unit Letter I : 1980 Feet From The SOUTH Line and 660 Feet From The EAST
Line of Section 14 Township 8 Range 30 NMDM Chaves County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
PREMIAN CORPORATION	BOX 1183 HOUSTON, TEXAS 77001
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually transported?	When
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If 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 as last time
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.H.F.D.				
Elevations (B.F., R.R.S., R.T., G.R., 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 lead oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Casing Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Current Prod. Test-MCF/D	Length of Test	Eqiv. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Casing Size

CERTIFICATE OF COMPLIANCE

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

APPROVED OCT 5 1983
BY ORIGINAL SIGNED BY EDDIE SEAY
OIL & GAS INSPECTOR

This form is to be filed in compliance with RULE 1154.
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 logs taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowance 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 conditions.
Separate Forms C-104 must be filed for each pool in multiple completed wells.

Vice President
(Title)

October 1, 1983
(Date)

RECEIVED
OCT 3 1983
O.C.D.
HOBBS OFFICE