

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NAME OF OPERATOR	
DISTRIBUTION	
STATE	
CITY	
ZIP	
MAILING ADDRESS	
AND OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
OPERATION	
OPERATION OFFICE	
OPERATOR	

Apollo Energy, Incorporated

Address

P. O. Box 5315, Hobbs, New Mexico 88241

Reason(s) for filing (Check proper box)

New Well

☐

Change in Transporter of:

Recompletion

☐

Oil

☐

Dry Gas

☐

Change in Ownership

☒

Casinghead Gas

☐

Condensate

☐

Other (Please explain)

EFFECTIVE DATE DECEMBER 30, 1982

Change of ownership give name

and address of previous owner

Shell Oil Company, P. O. Box 991, Houston, Texas 77001

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Hodges C Federal	2	Cato San Andres	State, Federal or Fee Federal	NM022636
Location	Unit Letter	Feet From The	Line and	Feet From The
	M	660	South	660
			Line and	West
	22	8S	Range	30E
			NMPM	Chaves
				County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Mobil Oil Company Pipeline Corp. Poration Dept.	P. O. Box 900, DALLAS, Texas 75221
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Cities Service Oil Company	P. O. Box 4906, Midland, Texas 79702
Well produces oil or liquids, give location of tanks.	Is gas actually connected? When
M 22 8S 30E	Yes 7-30-68

this production is commingled with that from any other lease or pool, give commingling order number:

CTB-175

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res't.	Diff. Res't.
ate Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Locations (DF, RAB, RT, GR, 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 allowable for this depth or be for full 24 hours)

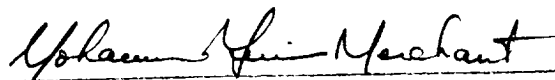
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

AS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shot-in)	Casing Pressure (Shot-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.



(Signature)

VICE PRESIDENT

(Title)

JANUARY 7, 1983

(Date)

OIL CONSERVATION DIVISION

APPROVED **JAN 13 1983**, 19
ORIGINAL SIGNED BY
BY **JERRY SEXTON**
TITLE **DISTRICT 1 SUPR.**

This form is to be filed in compliance with RULE 1101.

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 conditions.

Separate Forms C-104 must be filed for each pool in multiple completed wells.

RECEIVED
JAN 12 1983
HOBBS OFFICE

RECEIVED
JAN 12 1983
RECEIVED
JAN 6 1983
HOBBS OFFICE
O.C.O.
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