

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	Change in Transporter of:	CHANGE OF WELL NAME
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas	
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate	

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name ANNEK CROSBY	Well No. 1	Pool Name, Including Formation CATO (SAN ANDRES)	Kind of Lease State, Federal or Fee FEE	Lease No. FEE
Location				
Unit Letter <u>B</u> ; <u>660</u> Feet From The <u>NORTH</u> Line and <u>1653</u> Feet From The <u>EAST</u>				
Line of Section <u>17</u> Township <u>8S</u> Range <u>30E</u> , NMPM, <u>CHAVES</u> 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"/>	Address (Give address to which approved copy of this form is to be sent)
MOBILE PIPELINE CO.	P.O. BOX 670 SEMINOLE, TEXAS 79360
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	P.O. BOX 300 TULSA, OKLA. 74102
If well produces oil or liquids, give location of tanks.	is gas actually connected? When
Unit <u>G</u> Sec. <u>17</u> Twp. <u>8S</u> Rge. <u>30E</u>	<u>NO</u>

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. Prestbridge
(Signature)

PETROLEUM ENGINEER

(Title)
14 OCT 87
(Date)

OIL CONSERVATION DIVISION

APPROVED 10CT 20 1987, 19
BY Eddie W. Seay
TITLE Oil & Gas Inspector

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.

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OCT 16 1987

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