

NAME OF OPERATOR	
LAND OFFICE	
FILE	
DATE	
LAND OFFICE	
TRANSPORTER	
OPERATOR	
REGISTRATION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 7088
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

APOLLO ENERGY, INC.

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 ☐

Transporter of:

Condensate ☐

Other (Please explain)

Effective October 1, 1983

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Eastland Hodges Federal	4	Cerro San Andres	State, Federal or Free Federal	NM02263
Location				
Unit Letter	H	Feet From The	North	Line and
				660
Line of Section	27	Feet From The	East	

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter, street or P.O. Box	Address (Give address to which approved copy of this form is to be sent)
KOCH OIL COMPANY	1725 N. GRIMES HOBBS, NEW MEXICO 88241
Name of Authorized Transporter of Gas, street or P.O. Box	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks	Is gas actually connected? When

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

COMPLETION DATA

Designate Type of Completion -- (A)	Flow Test	Flow Test	Flow Test	Workover	Deepen	Flow Test	Flow Test	Flow Test
Date Spudded	Down Completion to Point	Test Depth	P.B.T.D.					
Elevations (D, RAB, K, G, etc.)	Location of Producing Formation	Top Oil/Gas Pay	Testing 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 (Test must be after recovery of total volume of fluid oil and must be equal to or exceed top allowable for this density or 12 for full 24 hours)

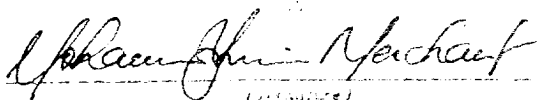
Date First New Oil Flow to Tanks	Date of Test	Producing Method (pump, pump, gas lift, etc.)	
Length of Test	Testing Procedure	Testing Procedure	Casing Size
Actual Prod. During Test	Oil - BBL	Water - BBL	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Grav. Concentration	Gravity of Components
Testing Method (pilot, back flow)	Testing Procedure (pilot-in)	Testing Procedure (back-in)	Casing 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)October 1, 1983
(Date)

OIL CONSERVATION DIVISION

OCT 5 1983

APPROVED _____, 19

BY **ORIGINAL SIGNED BY EDDIE SEAY**
OIL & GAS INSPECTOR

TITLE _____

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 portions of this form must be filled out completely for allowable, new and recompleted wells.

Fill out only parts I, II, III, and VI for changes of owner, well name, or transporter or other such change of conditions.

Separate forms (this) must be filed for each pool in multiple completed wells.