

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OPERATOR	GAS
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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501Form C-104  
Revised 10-31-78  
Format 06-01-83  
Page 1REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Apollo Energy, Inc.	
Address P. O. Box 5315 Hobbs, New Mexico 88241	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Effective March 1, 1987
Change in Transporter of: <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate

If change of ownership give name  
and address of previous owner \_\_\_\_\_

## II. DESCRIPTION OF WELL AND LEASE

Lease Name Thelma Crosby B	Well No. 3	Pool Name, including Formation Cato San Andres	Kind of Lease State, Federal or Fee	Lease No. Fee
Location Unit Letter <u>E</u> ; <u>1930</u> Feet From The <u>North</u> Line and <u>710</u> Feet From The <u>West</u> Line of Section <u>5</u> Township <u>9S</u> Range <u>30E</u> , <u>NMPM</u> , <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"/> Pride Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 3237 Abilene, Texas 79604					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Oxy Cities Service NGL, Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 4906 Midland, Texas 79702					
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 5	Twp. 9	Rge. 30	Is gas actually connected? Yes	When 3-1-77

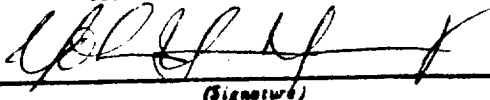
If this production is commingled with that from any other lease or pool, give commingling order number: CTB-188

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.

Mohammed Yamin Merchant



(Signature)

President

(Title)

February 12, 1987

(Date)

## OIL CONSERVATION DIVISION

APPROVED FEB 12 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 allow-  
able 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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FEB 11 1987

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HOBBS OFFICE