

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES DESIRED	
DISTRIBUTION	
SANTA FE	
FILE	
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LAND OFFICE	
TRANSPORTER	
OPERATOR	
PRODUCTION OFFICE	
Operator	

Apollo Oil Company

Address

Box 1737, Hobbs, N.M. 88240

Reason(s) for filing (Check proper box)

New Well	☐	Change in Transporter of:	
Recompletion	☐	Oil	☐
Change in Ownership	☒	Casinghead Gas	☐
		Dry Gas	☐
		Condensate	☐

Other (Please explain)

Effective 11-16-87

If change of ownership give name and address of previous owner: Hondo Oil & Gas Company, Box 2208, Roswell, N.M. 88201

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
State 182 'A'	4	Lovington Abo	State, Federal or Leasing State	B-1505
Location	Unit Letter	K	1650	Feet From The
		South	Line and	2289.54
		Feet From The	West	
Line of Section	31	Township	16S	Range
			37E	Lea

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)					
Texas-New Mexico Pipeline Company	Box 2528, Hobbs, N.M. 88240					
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)					
Phillips 66 Natural Gas Company	4001 Penbrook, Odessa, Texas 79762					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	N	31	16S	37E	Yes	10-1-71

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	Side-Entry	Other
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Excavations (DE, KKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Perforations	Length Casing Head							

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)

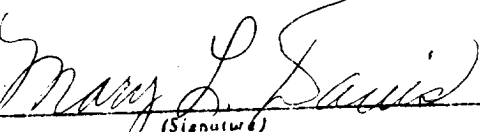
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, Pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

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



Oil & Gas Accountant

1-20-88

(Date)

OIL CONSERVATION DIVISION

APPROVED FEB 1 1988

BY Paul Kautz
Geologist

TITLE

This form is to be filed in compliance with RULE 113.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviated hole taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all new, on new and recompleted wells.

Fill out only Sections I, II, III, and VI for a change of owner well name or unit, or transporter or other such change of condition. Form C-104 must be filed for each pool in a well.