

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

1. OPERATOR	
Operator Apache Corporation	
Address P. O. Box 4628, Houston, TX 77210	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain) change of operator - effective 3/9/84	
If change of ownership give name and address of previous owner Natomas North America, Inc. 1 West Third Street, Suite 900, Tulsa, OK 74103	

II. DESCRIPTION OF WELL AND LEASE				
Lease Name Maljamar N. Unit	Well No. 1	Pool Name, including Formation West Kemnitz-Lower Wolfcamp	Kind of Lease State, Federal or Fee State	Lease No. G-5489
Location Unit Letter <u>G</u> ; 1980 Feet From The <u>East</u> Line and 1980 Feet From The <u>North</u> Line of Section <u>31</u> Township <u>16S</u> Range <u>33E</u> , NMPM, Lea 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"/> Charter Crude Oil Company <u>WPL Inc.</u>		Address (Give address to which approved copy of this form is to be sent) P. O. Box 5008, Houston, TX 77012		
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum		Address (Give address to which approved copy of this form is to be sent) Phillips Bldg., Bartlesville, OK 74004		
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 31	Twp. 16S	Rge. 33E
		Is gas actually connected? When		

IV. COMPLETION DATA									
Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.			
Elevations (DF, RKB, 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			

V. 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

VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION DIVISION	
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.		APPROVED <u>APR 4 1984</u> , 19	
<u>Barbara A. Ellis</u> (Signature) Supervisor		BY <u>JERRY SEXTON</u> DISTRICT I SUPERVISOR	
<u>3/13/84</u> (Date)		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 deviated 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 multiple completed wells.	

RECEIVED  
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