

I.

Operator
Apollo Oil Company

Address
c/o Oil Reports & Gas Services, Inc., Box 763, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter ☐ Other (Please explain)
Recompletion ☐ Oil ☐
Change in Ownership ☒ Casinghead Gas ☐

Effective 1/1/74

If change of ownership give name and address of previous owner
Standard Production Co., Route 2, Box 183-S, Lubbock, Texas 79417

II. DESCRIPTION OF WELL AND LEASE

Lease Name
Brown

Well No.
4

Pool Name
Jalmat

Location
Unit Letter F 1690 Feet From The North

Line of Section 25 Township 25 S

Kind of Lease
State, Federal or Fee Fee

Lease No.

1870 Feet From The West

36 E NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate
The Permian Corporation

Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas

If well produces oil or liquids, give location of tanks.

Unit F Sec. 25 Twp. 25 S R. 36 E

If this production is commingled with that from any other lease

Address to which approved copy of this form is to be sent
Box 1183, Houston, Texas 77001

Address to which approved copy of this form is to be sent

Already connected? No When

Submitting order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)

Oil Well ☒ Gas Well ☐

Date Spudded

Date Compl. Ready to Prod.

Elevations (DF, RKB, RT, GR, etc.)

Name of Producing Formation

Perforations

Depth

TUBING, CASING, & TUBING SIZE

HOLE SIZE

CASING & TUBING SIZE

TIME RECORD

DEPTH SET

SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL

Date First New Oil Run To Tanks

Date of Test

Length of Test

Tubing Pressure

Actual Prod. During Test

Oil - Bbls.

GAS WELL

Actual Prod. Test-MCF/D

Length of Test

Testing Method (pitot, back pr.)

Tubing Pressure (shut-in)

Method of total volume of load oil and must be equal to or exceed top allowable (4 hours)

Method (Flow, pump, gas lift, etc.)

Lease Size

Choke Size

Gas - MCF

Gravity of Condensate

Shut-in

Choke Size

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature

Agent

Title

1/28/74

Date

OIL CONSERVATION COMMISSION

RECEIVED

19

Order Signed by
Joe D. Ramey
Dist. I, Supv.

This form is to be filed in compliance with RULE 1104.
This is a request for allowable for a newly drilled or deepened well. This form must be accompanied by a tabulation of the deviation taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable for new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, name or number, or transporter, or other such change of condition.