	NO. OF COPIES RECI	i 		
i	DISTRIBUTIO	5		
	SANTA FE	1		
	FILE		V	
	U.S.G.S.			
	LAND OFFICE			
	TRANSPORTER	OIL		
	TRANSPORTER	G A S	1	
1	OPERATOR			
I.	PRORATION OF			

1	NO. OF COPIES RECEIVED	1	1					
i i	DISTRIBUTION	5		NEW MENICO OIL CO	NICEDIATION COMMESSION	Form C-104		
}	SANTA FE				ONSERVATION COMMISSION	Supersedes Old C-104 and C-110		
}		+-		REQUEST P	FOR ALLOWABLE	Effective 1-1-65		
- }	FILE	11.	~		AND			
	U.S.G.S.	<u>:</u>	<u> </u>	AUTHORIZATION TO TRAI	NSPORT OIL AND NATURAL G	AS		
Ł	LAND OFFICE	!						
	TRANSPORTER GAS	1						
}	OPERATOR							
ı	PRORATION OFFICE	İ						
•	Cperator							
	Depco Inc							
1	Address							
	825 Petroleum Club Building, Denver, Colorado 80202							
ļ	Reason(s) for filing (Check proper box) Other (Please explain)							
	New Well Change in Transporter of:							
}	Recompletion			Oil Dry Gas	· <u> </u>			
į	Change in Ownership X			Casinghead Gas Condens	sate			
ı								
	If change of ownership give and address of previous over the over the control of	wner_	D	International Oil & Gas Denver, Colorado 8020		coleum Club Building,		
**.	Lease Name	783 (18.	. 10 1	Lease No. Well No. Pool Nam	ne, Including Formation	Kind of Lease		
	Miles Fed	pra	1	SF 079162 1 Basi	n Dakota	State, Federal or Fee Federal		
	Location MILLES FEC	CLO	-	01 073102 1 1001				
	Location		710	Nom+h	1750	west		
	Unit LetterC	_ ;	/10	Feet From The North Line	e and Feet From T	he		
					mr. Die 1	N		
	Line of Section 5		Tow	vnship 26N Range	7W , NMPM, Rio A	Arriba County		
III.	DESIGNATION OF TRA	ANSP	ORI	TER OF OIL AND NATURAL GAS	S			
	Name of Authorized Transpo	orter o	f Oil	or Condensate 🔀	Address (Give address to which approv	ed copy of this form is to be sent)		
	McWood Co	ר מיני	nat	-ion	Oil & Gas Bldg., Box	330, Abilene, Texas		
	Name of Authorized Transpo	orter o	f Cas	singhead Gas or Dry Gas X	Address (Give address to which approved Fidelity Union Tower	ed copy of this form is to be sent)		
]			0 0	Fidelity union Tower	Bullaing		
	Southern	unı	.on	Gas Company	1507 Pacific Ave., Da. Is gas actually connected? Whe	llas, Texas		
	If well produces oil or liquid	ds,		Unit Sec. Twp. Rge.				
	give location of tanks.			C 5 26N 7W	Yes	Sept. 8, 1965		
		:	4	th that from any other lease or pool,	give commingling order number:			
***	If this production is comm COMPLETION DATA	ingie	a wit	in that from any other rease or poor, t				
I V .				Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
	Designate Type of (Comp	letio	on = (X)				
	Date Spudded			Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Date Spudded							
				Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	Elevations (DF, RKB, RT,	GR, e	tc.j	Name of Producing Formation	100 011, 032 1 -7			
						Depth Casing Shoe		
	Perforations							
				TUBING, CASING, AND	CEMENTING RECORD			
	HOLE SIZE			CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	11022 0122							
				 				
	L				<u></u>	1 ha1 aa		
V.	TEST DATA AND REG	QUES	TF	OR ALLOWABLE (Test must be as	fter recovery of total volume of load oil pth or be for full 24 hours)	and must be equal to or exceed top allow-		
• •	OIL WELL			able joi titta de	Producing Method (Flow, pump, gas li	ft. etc.)		
	Date First New Oil Run To	Tank	5	Date of Test	Producing Method (1, tom, hearly \$42 tr	ATR		
	Length of Test			Tubing Pressure	Casing Pressure	Chok. \$1211.[[VI]]		
						1/LOLI I LD		
	Actual Prod. During Test			Oil-Bbls.	Water-Bbls.	Gas-MCF		
	Aetual Prod. Daning 1921					JUN 3 1986		
Ų					DIL CON. COM.			
	GAS WELL				Bbls. Condensate/MMCF	Gravity of Condensate		
	Actual Prod. Test-MCF/D)		Length of Test	BDIB. COMMENTE STEP / INTERIOR			
	Testing Method (pitot, bac	k pr.)		Tubing Pressure	Casing Pressure	Choke Size		
		-						
	THE OF COURT TANCE				OII CONSERVA	ATION COMMISSION		
VI	CERTIFICATE OF COMPLIAN		CE					
					APPROVED JUN	6 1966 19		
	I hereby certify that the rules and regulations of the Oil			regulations of the Oil Conservation	APPROVED			
	I hereby certify that the rules and regulations in the info Commission have been complied with and that the info Commission have been complete to the heat of my knowledge.			with and that the information given	Ung =			
	Commission have been complied with and that the information gashove is true and complete to the best of my knowledge and bel			e pest of my knowledge and better.	SUPERVISOR DIST. #3			
					TITLE			
		ρ,		P		compliance with RULE 1104.		
				/	This form is to be filed in	Combitance arm unam cont		

VI

The Stylie
(Signature)
Dist. Prof. Supt.
<u> 111N 2 1966</u>
(Date)

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 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 multiply completed wells.