

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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SANTA FE

FILE

U.S.U.S.

LAND OFFICE

TRANSPORTER

OIL

GAS

OPERATOR

PRORATION OFFICE

1.

Operator

DEPCO, Inc.

Address

1000 Petroleum Building - Denver, CO 80202

Reason(s) for filing (Check proper box)

New Well

Recompletion

Change in Ownership

Change in Transporter of:

Oil

Casinghead Gas

Dry Gas

Condensate

Other (Please explain)

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SEP 13 1983

OIL CON. DIV.

DMT

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name

MKL

Well No.

16R

Pool Name, including Formation

Otero Chacra

Kind of Lease

State, Federal or Private

Lease No.

SF079162

Location

Unit Letter

J

1520 Feet From The

East

Line and

1500 Feet From The

South

Line of Section

5

Township

26N

Range

7W

NMPM,

Rio Arriba

County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil

or Condensate

Name of Authorized Transporter of Casinghead Gas

or Dry Gas

El Paso Natural Gas Company

Address (Give address to which approved copy of this form is to be sent)

P.O. Box 1492, El Paso, TX 79978

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

Unit

Sec.

Twp.

Rge.

Is gas actually connected?

When

No

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

IV. COMPLETION DATA

Designate Type of Completion - (X)

Oil Well

Gas Well

New Well

Workover

Deepen

Plug Back

Same Res'v.

Diff. Res'

Date Spudded

4-19-82

Date Compl. Ready to Prod.

7-13-82

Total Depth

3425' KB

P.B.T.D.

3342' KB

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

6056' GR 6068' KB

Name of Producing Formation

Chacra

Top Oil/Gas Pay

3079' KB

Tubing Depth

3137' KB

Perforations

3082'-3100'; 3162'-72' KB

Depth Casing Shoe

3425' KB

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE

CASING & TUBING SIZE

DEPTH SET

SACKS CEMENT

12-1/4"

8-5/8"

335' KB

275 sx

7-7/8"

5-1/2"

3425' KB

540 (2 stage)

3-1/2"

3137' KB

-

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

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

1773

3 Hr.

0

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Testing Method (pilot, back pr.)

Tubing Pressure (Shut-in)

Casing Pressure (Shut-in)

Choke Size

Back Pressure

952 psig

--

3/4"

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 above is true and complete to the best of my knowledge and belief.

Signature

Production Superintendent - Southern Rockies

September 13, 1983

Date

OIL CONSERVATION DIVISION

APPROVED

Original Signed by FRANK T. CHAVEZ

SUPERVISOR DISTRICT #

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 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 multiple completed wells.