NERGY AND MINERALS DEPARTMENT

-0. 07 104110 0			
DISTRIBUT	DISTRIBUTION		
BANTA FE	BANTA FE		
FILE	FILE		
U.S.G.S.	U.S.G.S.		
LAND OFFICE	LAND OFFICE		l
TRANSPORTE	OIL	L_	
	GAS		
OPERATOR	OPERATOR		L
PRORATION O	PROBATION OFFICE		

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OIL CONSERVATION DIVISION

DISTRIBUTION	P. O. B	OX 2088			
BANTA FE	SANTA FE, NE	W MEXICO 87501			
FILE		•			
LAND OFFICE					
OIL		OR ALLOWABLE			
TRANSPORTER GAS		AND SPORT OIL AND NATURAL GAS			
PROBATION OFFICE	AUTHORIZATION TO TRANS	SPORT OIL AND NATORAL GAS			
Operator					
DEPCO, Inc.					
Address					
1000 Petroleum Buildin	ng - Denver, CO 80202				
Reason(s) for filing (Check proper bo	DE /	Other (Please explain)			
New Well	Change in Transporter of:	_	ر کا ایک ایک کا ایک	٠,	
Recompletion	OII Dry G	Gas X			
Change in Ownership	Cazinghead Gas Cond	ensate	Sec. 18		
L					
If change of ownership give name and address of previous owner					
and address of previous owner.					
DESCRIPTION OF WELL AND	LEASE				
Lease Name	Well No. Pool Name, Including				
MKL _	5A Basin Dakot	ta State Fede	ral ox XXXX SF079	L62	
Location					
Unit Letter 0 : 11	20 Feet From The South Li	ine and 1725 Feet From	The East		
Oint Letter					
Line of Section 6 T	ownship 26N Range	7W , NMPM, Ric	o Arriba Cou	nty	
DESIGNATION OF TRANSPOR	RTER OF OIL AND NATURAL G	AS			
Name of Authorized Transporter of C	or Condensate X	Address (Give address to which app	Address (Give address to which approved copy of this form is to be sent)		
Giant Refining Co.		P. O. Box 256, Farmington, NM 87401			
Name of Authorized Transporter of C		Address (Give address to which approved copy of this form is to be sent)			
El Paso Natural Gas C		P. O. Box 1492, El Pas			
If well produces oil or liquids,	Unit Sec. Twp. Rge.		hen		
give location of tanks.	0 16 26N 7W	No			
If this production is commingled w	with that from any other lease or pool	, give commingling order number:			
COMPLETION DATA			Plug Back Same Res'v. Diff. R		
Resignate Type of Complet	ion - (X)	New Well Workover Deepen	Plug Back Same Res'v. Diff. R	••••	
Resignate Type of Complete		X	P.B.T.D.		
Date Spudded	Date Compl. Ready to Prod. 10-20-82	Total Depth 6850 KB	6804' KB		
5-17-82			Tubing Depth		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation Dakota	Top Oil/Gas Pay 6592' KB	6638' KB		
6101' KB	Daroca		Depth Casing Shoe		
Perforations 6502-66061 6642	2-52'; 6662-70'; 6682-92'	KB	6848' KB		
0392-0000 , 0042					
		O CEMENTING RECORD	EACYE CEMENT		
HOLE SIZE	CASING & TUBING SIZE	DEPTHSET		SACKS CEMENT	
12-1/4"	8-5/8"	4851 KB	330 sx 1615 (3-Stage)		
7-7/8"	5-1/2"	6848' KB	Toto (2-2rage)		
	1-1/2"	6638' KB			
TEST DATA AND REQUEST 1	FOR ALLOWABLE (Test must be	after recovery of total volume of load o depth or be for full 24 hours)	il and must be equal to or exceed top (1110W	
OIL WELL	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)		
Date First New Oil Run To Tanks	Date of 1981				
	Tubing Pressure	Casing Pressure	Choke Size		
Length of Test	I doing bissame				
	01. 251-	Water - Bbls.	Gas-MCF		
Actual Prod. During Test	Otl-Bbjs.				
	<u></u>				
GAS WELL	Length of Test	Bble. Condensate/MMCF	Gravity of Condensate		
Actual Prod. Test-MCF/D	3 Hr	0	_		
1124 Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in)	Choke Size		
and the state of t	1981	_	3/4		
Back Pressure		OIL CONSERVA			
CERTIFICATE OF COMPLIAN	CATE OF COMPLIANCE OIL CONSERVA		TION DIVIDION		
	_	APPROVED	11/1 1984 . 19		
hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given Though the true and complete to the best of my knowledge and belief.			K 1 / The second		
	-	SUPERVISOR DISTRICT 並 V			
		TITLE			
			compliance with RULE 1104.		
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1) To Commerce
(Signature)

Production Superintendent-Southern Rockie (Title)

Apr. 1, 1984 (Date) If this is a request for allowable for a newly drilled or despaned 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.