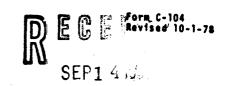
STATE OF NEW MEXICO MENT

EHUT AND MINE	IALS I	JEP/	ARTI
	T		
DISTRIBUTE			
BANTA PE			
FILE			
V.8.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	8 AS		Щ
OPERATOR			

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501



1.	TRANSPORTER OIL OAS OPERATOR PRONATION OFFICE	REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				AL C OM DIST				
	DEKALB Energy Company									
	110 16th Street, Suite 1000, Denver, Colorado 80202									
	Reason(s) for filing (Check proper		ge in Transpo	eter of		Other (Pleas	e explain) 6/88 DEP	o Inc		
	Recompletion	Oil		Dry	Gas 🔲	operatin	ig under	the name	will be	egin
	Change in Ownership	Casti	nghead Gas	Conc	lensate 📗	DEKALB E	nergy Co	npany		
	If change of ownership give name and address of previous owner _	• DEPCO	, Inc.	(address	- same a	s above)				
u.	DESCRIPTION OF WELL AN	D LEASE	No. Poci Na	na lacindina	Faratta	·	100-1-00			
	Mudge "A"	7			ctured Ci	liff	Kind of Leas SXXXX Feder	-		SF07889
	Location		1		c cur cu c		1			10.07003
	Unit Letter;;	.650 Feet	From The S	outh	ine and	990	Feet From	The Wes	it	
i	Line of Section 6	Township	27N	Range	11W	, NMPM	. San	Juan		Count
т.	DESIGNATION OF TRANSPO	RTFR OF O	NT. AND NA	ATURAL G	AS					
<u> </u>	Name of Authorized Transporter of		or Condensate		Address (C	ive address	to which appro	ved copy of ti	is form is t	o be sent)
	Name of Authorized Transporter of	Casinghead Gar	er Dr	y Gas [X]	Address (ive address	to which appro	und norm of th	in landa	
-	Gas Company of New Me	-		رها دده ر			, Albuqu		-	-
ı	If well produces oil or liquids,		Sec. Twy	Rge.	ls gas acti	ally connecte	ed? Wh		07123	<u></u>
L	give location of tanks.				<u> </u>	YES				·
	If this production is commingled COMPLETION DATA	with that from	any other le	ease or pool	, give commi	ngling order	unupet:			
	Designate Type of Comple	tion – (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Bock	Same Res	v. Diff. Res
}	Date Spudded		l. Ready to Pr	rod.	Total Dept	<u>, </u>	<u> </u>	P.B.T.D.	<u> </u>	
-	Elevations (DF, RKB, RT, GR, etc.	Name of Pr	Name of Producing Formation			Top Oll/Gas Pay		Tubing Depth		
-	Perforations				1			Depth Casis	ng Shoe	
L	· · · · · · · · · · · · · · · · · · ·		·				·			
-	HOLE SIZE				DEPTH SET			SACKS CEMENT		
<u> </u>	HOCE SIZE	- CASI	NO & 10811		 	DEFINE			CAS CEMI	ENI
-			·		-		···	 		
	TEST DATA AND REQUEST	FOR ALLOW	ABLE (T	est must be a	fter recovery	of total volum	e of load oil	ind must be eq	jual to or ex	ceed top allo
_	OIL WELL Date First New Oil Run To Tanks	Date of Tee		, , , , , , , , , , , , , , , , , , ,			pump, gas lif	, etc.)	 .	
L	· · · · · · · · · · · · · · · · · · ·									
	_ength of Test	Tubing Pres	88W 9		Casing Pres	eswe :	•	Choke Size		
7	Actual Prod. During Test Oil-Bbls.		Water - Bbls.		Gas - MCF					
<u>'</u> _		<u> </u>	···-		L					
حتب	AS WELL Actual Prod. Test-MCF/D	Length of T			Bhie Conde	nagte/AMCF		Company of C		 -
'	ICINAL PION. ITEL MCP/D	Faudru of 1	·		Duis. Cond	medie/ MING P		Gravity of C	MIGSUS GIS	
7	esting Method (pitot, back pr.)	Tubing Pres	swe (Shut-1	.s)	Casing Pres	swe (Shat-	ia)	Choke Size		
ı. Ci	ERTIFICATE OF COMPLIAN	iCE	<u> </u>	i		OIL CO	NSERVATI	ON DIVIS	ION	
7 1	hereby certify that the rules and	regulations o	f the Oil Co	nservation	APPROV	ED	MAR 06	1989 1989	1	.

Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

District Production Superintendent

(Tule)

September 12, 1988

(Date)

SUPERVISION DISTRICT #3 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 allow able 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