	NO. OF COPIES RECEIVED DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE I RANSPORTER OPERATOR PRORATION OFFICE	REQUEST FO	SERVATION COMMISSION IR ALLOWABLE AND SPORT OIL AND NATURAL GA	RECEIVED BY Supersedes Old C-104 and C-110 OCTI 19 1983 SO. C. D. ARTESIA, OFFICE	
•••	Operator DEPCO, INC. Address 800 Central, Odessa, Reason(s) for filing (Check proper box) New Well Recompletion Change in Ownership	Texas 79761 Add Change in Transporter of: Oil Dry Gas Casinghead Gas Condensa	Other (Please explain)		
	If change of ownership give name and address of previous owner				
	AND I	FASE	Kind of Lease	Lease No.	
11.	DESCRIPTION OF WELL AND L		Redetal	1	
	Rose Federal Com.	10 Pecos Slope A	Ьо	<u>reactur</u> <u>mr. 56,05</u>	
	Location	couth	and 660 Feet From T	he East	
	Unit Letter I ; 165	0 Feet From The South Line	and Feet From T		
		nship 5-S Range	25-E , NMPM, Cnaves	County	
	Line of Section 21 Town	nship J=3Auige			
	THANSPORT	ER OF OIL AND NATURAL GAS		ed conv of this form is to be sent)	
III.	Name of Authorized Transporter of Oil	or Condensate X			
	I are i Guida Oil Purch	acing Company	Box 175, Artesia, New Mexico 88210 Address (Give address to which approved copy of this form is to be sent)		
	Navajo Crude OII Fulch Name of Authorized Transporter of Cas	inghead Gas 📋 or Dry Gas 🕅			
	Transwestern Pipeline	Company	Suite 614, 1st. Nat 1 Is gas actually connected?	Bank, Odessa, Texas 7976	
	If well produces oil or liquids,	Unit Sec. Iwp. Age.	1	10-7-83	
	-inelegation of tanks.	I 21 5 25			
	If this production is commingled wit	h that from any other lease or pool, g	ive comminging order number.		
IV	COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res			Plug Back Same Res'v. Diff. Res'r.	
	Designate Type of Completio	$\mathbf{x} = (\mathbf{X})$	X	P.B.T.D.	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth		
	2-21-83	6-29-83	4285'	4189'	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	3625'	
	3758 GR	Abo	3719'	Depth Casing Shoe	
	Perforations 3719-3869' 2441" holes			4284'	
	3719-3869' 2441	TUBING, CASING, AND	CEMENTING RECORD		
		CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	HOLE SIZE	16"	59'	95 sxs.	
	14 3/4"	10 3/4	989'	675 sxs. Cire. 100 sxs. 1150 sxs. Circ 18 sxs.	
	7 7/8"	5 1/2"	4284'		
		2 3/8"	102 I	and must be equal to or exceed top allow-	
V TLY HALA AND REQUEST - CONTRACT AND RESULTS					
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	iji, etc.j	
	Dute 1 Wat 110		Casing Pressure	Choke Size	
	Length of Test	Tubing Pressure	Casing Freesawo		
			Water-Bbls.	Gas-MCF	
	Actual Prod. During Test	Oll-Bbls.		<u>N</u>	
			and the second sec		
				Gravity of Condensate	
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF		
	992	4 hrs.	O Casing Pressure (Shut-in)	Choke Size	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	1050 BHP	14-24/64	
	Back pr.	946#		ATION COMMISSION	
٦	VI. 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.		APPROVED 0CT 21 1983, 19		
			Losiie A. Clements		
			Supervisor District II		
			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. Separate Forms C-104 must be filed for each pool in multiply completed wells.		