		-				
	NO. OF COPIES RECEIVED					
-	DISTRIBUTION	NEW MEXICO OIL CO	ONSERVATION COMM	ISSION	Form C+10	4
-			FOR ALLOWABLE	155,517		Old C-104 and C-110
1	SANTA FE	REQUEST	AND SE	TEIVED	Effective 1	1-1-65
<u> </u>	FILE		AND REC	CEIVED		
	u.s.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND I	NATURAL GA	45	
	LAND OFFICE		ADD.	25 1983		
Γ	I RANSPORTER OIL		APR	23 1303		
1	GAS		\(\frac{1}{2}\)	<b>~ ^</b>		
	OPERATOR			C. D.		
$\vdash$	PRORATION OFFICE		ARTES	A OFFICE		
٠ ـــا	Operator					
	DEPCO, INC	. 🗸				
$\perp$	DEPCU, INC					
- 1 '		L, ODESSA, TX 79761				
L		L, ODESSA, 1A 79701	Other (Pleas	e explain)		
- 1	Reason(s) for filing (Check proper box)	Change in Transporter of:				
-   :	New Well					
] 1	Recompletion	Oil Dry Ga	<b>=</b> 1			
	Change in Ownership	Casinghead Gas Conder	nsate			
_						
I	change of ownership give name					
a	nd address of previous owner					
	THE PERSON OF THE TAND I	EACE				
	DESCRIPTION OF WELL AND L	Well No. Pool Name, Including F	ormation	Kind of Lease		Lease No.
	_			State, Federal	or Fee Feder	al NM 46408
L	Rose Federal	7 Pecos Slopes	s Abo	<del></del>		-
	Location	200	660		Foot	1
	Unit Letter I 19	980 Feet From ThSouth Lin	ne and 000	Feet From T	The <u>East</u>	
	Line of Section 19 Town	nship 5S Range	25E , NMP	м, Chave	es	County
L						á.
	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL G	AS	<del></del>		
11. I	Name of Authorized Transporter of Oil	or Condensate	Address (Give address	; to which approv	ved copy of this for	m is to be sent)
	Name of Names					
	Name of Authorized Transporter of Casinghead Gas or Dry Gas X Address (Give address to which approved copy of this form is to be sent)					
j			Cuito 61/ 19	t Nationa	1 Rank Odes	sa, TX 79760
ļ	Transwestern Pipel		Is gas actually connect	cted? Who	en al v	Sa. In Circu
Ī	If well produces oil or liquids,	, Oilli	i		1-2 8	
ı	give location of tanks.	I 19 5 25	-No //		Waiting or	1 P.I.
	If this production is commingled wit	h that from any other lease or pool	, give commingling ord	ler numb <b>er</b> :		
w.	COMPLETION DATA				Plug Back San	ne Res'v. Diff. Res'v.
٧.		Oil Well Gas Well	New Well Workove	r Deepen	Plug Back Ban	ne ries (, Dim ries ()
	Designate Type of Completio	on - (X)	X .	1	 _ <del> </del>	
		Date Compl. Ready to Prod.	Total Depth		P.B.T.D.	
	Date Spudded		42251		4139	•
	2-21-83	4-13-83	Top Oil/Gas Pay		Tubing Depth	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation			3600	•
	3840 GR	Abo	3677'		Depth Casing Sh	
	Perforations 7/. 7 7	- <del></del>			i -	
	<del>3644</del> -3827' 35	44" holes			4224	·
		TUBING, CASING, A	ND CEMENTING REC	ORD		
		CASING & TUBING SIZE	DEPTH		SACK	S CEMENT
	HOLE SIZE			10'	2.67 yds	
	26"	20"		54'		irc 60 sxs
	17 1/2"	13 3/8"			(	
	7 7/8"	4 1/2"	423			w/DV tl @ 2276
		2 3/8"	360		Circ 30	
	TOURSE FOR ALLOWARIE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow-					
٧.	TEST DATA AND REQUEST F	able for this	depth or be for full 24 ho	urs)		
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (F	low, pump, gas l	ist, etc.)	, 2
	Date t hist Man Off Light 10 1 dive					TO-03
		Tubing Bressure	Casing Pressure		Choke Size	015 29 0
	Length of Test	Tubing Pressure				Post 29 BK
			Water-Bbls.		Gas-MCF	V agrees
	Actual Prod. During Test	Oil-Bbls.	Addi - Dhie.			b* '
	CACWELL					<del> </del>
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/M	IMCF	Gravity of Cond	densate
	Actual Prog. 1881-MCF/D		0			-0-
	884	Tubing Pressure (Shut-in)	Casing Pressure (S	hut-in)	Choke Size	
	Testing Method (pitot, back pr.)	1	Į.	•	8-17/6	<i>I</i> 1
	Back Pressure	975	1085			
¥74	. CERTIFICATE OF COMPLIAN	NCE	01	L CONSERV	ATION COMM	1331UN
V)	I. CERTIFICATE OF COMPENS	• = —	11	4 0 40		

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.

R.L. Denney/vm
Chief Production Clerk
(Title)
4-22-83
(Date)

APPROVED	JUL 1 8 1983 Original Signed Sy Original Signed Sy	, 19
AFFROVED	Original Signed Sy Leslie A. Clements	
	Supervisor District II	
TITLE :	3000	

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 sllow-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 concluded wells.



## DRILLING CO., INC. - OIL WELL DRILLING CONTRACTORS

P. D. BOX 20 ECEIVED SWELL, TEW MEXICO 88201 TELEPHONES: ARTESIA 505/746-6757 ROSWELL 505/623-5070

APR 25 1983

O. C. D. ARTESIA, OFFICE

April 1, 1983

Depco Inc. 800 Central Odessa, Texas 79761

Re: Rose Federal #7

Gentlemen:

The following is a Deviation Survey of the above well located in Chaves County, New Mexico.

	^			
496 <b>' -</b>	1/20	2963 <b>'</b>	-	3/4 <sup>O</sup>
955 <b>' -</b>	10	3459 <b>'</b>	-	1 1/40
1439' -		3581 <b>'</b>		
1568' -	10	4071	-	1 <sup>0</sup>
2038' -	3/40	4161	-	$1 1/4^{\circ}$
2490' -	3/4 <sup>0</sup>	4225	_	$1 1/4^{\circ}$

Arnold Newkirk

STATE OF NEW MEXICO) COUNTY OF CHAVES

The foregoing was acknowledged before me this day of Orpul, 1983 by Arnold Newkirk.

My Commission Expires:

Notary Public

april 10, 1984

## NEW MEXICO OIL CONSERVATION DIVISION

P. O. DRAWER "DD"

JUL 1 3 1983

ARTESIA, NEW MEXICO 88210

O. C. D. ARTESIA, OFFICE

Title

NOTICE OF GAS CONNECTION	DATEJuly 11, 1983
	Depco, Inc.
Rose Federal	#7 - Unit Letter <del>Unknown</del>
Lease	Well Unit
19-5S-25E, Chaves Co. S.T.R.	Pecos Slope (Abo) Pool
Transwestern was made Name of Purchaser	e on
	Transwestern Pipeline Company
	Company
	a. K. Berdy A. K. Berdy
	Reprédentative
	Jr. Analyst Contract Administration

cc: Operator

Oil Conservation Division

P. O. Box 2088

Santa Fe, New Mexico 87501