

Form 1160-5
November 1985
Formerly 7-6-81

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
Artesia, NM 88210

---SUBMIT IN TRI
Other instructio

mission

Form approved.
Budget Bureau No. 1004-
Expires August 31, 1985

dsf

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT" for such proposals.)

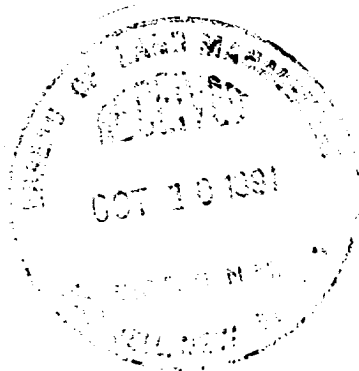
1. OIL WELL ☐ GAS WELL ☒ OTHER ☐	31 JUN 19 1991	5. LEASE DESIGNATION AND SERIAL
2. NAME OF OPERATOR DEKALB Energy Company	RECEIVED	NM 36408
3. ADDRESS OF OPERATOR 1625 Broadway Denver, CO 80202	OCT 30 1991	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1-1980'FSL, 660'FEL NE SE	O. C. D. ARTESIA OFFICE	7. UNIT AGREEMENT NAME
14. PERMIT NO API 30-005-61929		8. FARM OR LEASE NAME Rose Federal
15. ELEVATIONS (Show whether DP, RT, GR, etc.) 3800'GR		9. WELL NO. 9
		10. FIELD AND POOL OR WILDCAT Pecos Slope Abo
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 20, T5S-R25E
		12. COUNTY OR PARISH 13. STATE Chaves NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETION	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL	CHANGE PLANS	Other: Gas Analysis	X

17. TO DESCRIBE PROPOSED OR COMPLETED OPERATIONS, GIVE PERTINENT DETAILS, AND GIVE PERTINENT DATES, INCLUDING ESTIMATED DATE OF STARTING AND PROPOSED WORK. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.

The Rose Federal No. 9 well has no H₂S concentration.



18. I hereby certify that the foregoing is true and correct

SIGNED <u>AL Hansen</u>	TITLE <u>District Superintendent</u>	DATE <u>6/6/91</u>
(This space for Federal or State office use)		
APPROVED BY _____	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		

*See instructions on Reverse Side

TRANSWESTERN PIPELINE COMPANY
(A SUBSIDIARY OF ENRON CORP)

GAS QUALITY TEST REPORT

PRODUCER DEPCO INC STATION NO. 2138-1
FIELD RED BLUFF EFFECTIVE DATE 2-1-87
RESERVOIR ABD LAB NUMBER 7
STATION NAME ROSE FEDERAL #9

COMPONENTS	SPECIFIC GRAVITY	MOLE FRACTION	LIQUEFIABLE HYDROCARBONS	COMPONENT GPM	GPM CONTENT
NITROGEN	.9672	.0757	PROPANE	27.514	.5535
CARBON DIOXIDE	1.5195	.0002	ISOBUTANE	32.698	.1144
HELIUM	.1382		N-BUTANE	31.510	.2237
OXYGEN	1.1048	.0000	LPG		.8967
HYDROGEN SULFIDE	1.1766	.0000	ISOPENTANE	36.562	.0841
WATER VAPOR	.6220	.0000	N-PENTANE	36.213	.0905
			HEXANES	41.111	.0493
			HEPTANES+	46.126	.0277
METHANE	.5539	.8386	NATURAL GASOLINE		.2517
ETHANE	1.0382	.0480			
PROPANE	1.5225	.0203	TOTAL LIQUEFIABLE GPM		1.1484
ISOBUTANE	2.0068	.0035			
N-BUTANE	2.0068	.0071	WATER VAPOR CONTENT:		
ISOPENTANE	2.4911	.0023	GAS MIXTURE STATIC PSIG		130.0
N-PENTANE	2.4911	.0025	FLOWING GAS TEMP (F)		45.0
HEXANES	2.9753	.0012	WATER VAPOR DEW POINT (F)		41.0
HEPTANES+	3.5607	.0006	LESS WATER VAPOR / MMCF		49.0
COMPOSITION-----		1.0000	DEHY INSTALLED (TW)		NO
			INSTRUMENT TYPE		RAN
			MOL FRACTION		.0010

MIXTURE SPECIFIC GRAVITY		SULFUR CONTENT (GR. PER 100 CF)	
CALC. FROM ANAL. (REAL)	.659	HYDROGEN SULFIDE	
DETERMINED BY TEST INST.	.656	MERCAPTANS	
(VERIFIED 1-15-87)		SULFIDES	
MIXTURE HEATING VALUE		RESIDUALS	
(BTU/CF @ 14.73 PSIA, 60F, SAT.)		TOTAL SULFUR	
CALCULATED FROM ANALYSIS	1032	MOLE FRACT H2S	
BY CALORIMETRY	NONE	COMPRESSIBILITY (Z)	.9976

PR: 10:54 FEB 5, 1987

ANALYST *J M Applegate* [TW]
J M APPLEGATE