

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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| LAND OFFICE            |                                     |
| TRANSPORTER            | <input checked="" type="checkbox"/> |
| OIL                    | <input checked="" type="checkbox"/> |
| GAS                    | <input checked="" type="checkbox"/> |
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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

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Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

SEP 08 '88

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

O. C. D.  
ARTESIA, OFFICE

I.

|  |  |
|--|--|
| Operator<br>DEKALB Energy Company  |  |
| Address<br>800 Central, Odessa, Texas 79761  |  |
| Reason(s) for filing (Check proper box)  | Other (Please explain)   |
| <input type="checkbox"/> New Well<br><input type="checkbox"/> Recompletion<br><input type="checkbox"/> Change in Ownership | Change in Transporter of:<br><input type="checkbox"/> Oil<br><input type="checkbox"/> Dry Gas<br><input type="checkbox"/> Casinghead Gas<br><input type="checkbox"/> Condensate<br>Corporate Name Change |

If change of ownership give name and address of previous owner: DEPCO, Inc., 800 Central, Odessa, Texas 79761

II. DESCRIPTION OF WELL AND LEASE

|  |               |  |  |                       |
|--|---------------|--|--|-----------------------|
| Lease Name<br>Rose Federal   | Well No.<br>8 | Pool Name, including Formation<br>Pecos Slopes ABO | Kind of Lease<br>State, Federal or Fee Federal | Lease No.<br>NM 36408 |
| Location<br>Unit Letter K : 1980 Feet From The South Line and 1680 Feet From The West<br>Line of Section 20 Township 5-S Range 25-E, NMPM, Chaves County |               |  |  |                       |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|  |  |
|--|--|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>         | Address (Give address to which approved copy of this form is to be sent) |
| Navajo Refining Company  | P.O. Box 175, Artesia, New Mexico 88210                                  |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |
| Transwestern Pipeline Company  | Ste 614, 1st Nat'l Bank, Odessa, Texas 79760                             |
| If well produces oil or liquids, give location of tanks.   | Is gas actually connected? When  |
| Unit K Sec. 20 Twp. 5 Rge. 25  | Yes 7-27-83  |

If this production is commingled with that from any other lease or pool, give commingling order number: 1057 ID-3

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

R. L. Denney  
(Signature)  
Chief Production Clerk  
(Title)  
9-1-88  
(Date)

OIL CONSERVATION DIVISION

APPROVED MAR 7 1989  
BY Original Signed By Mike Williams  
TITLE

This form is to be filled 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 deviated 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 filled for each pool in multiphase completed wells.