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∪.S.G.S.				,	AUTHO	RIZAT	
LAND OFFICE		1	Ш				
TRANSPORTER	OIL	1	L				
	GAS						
OPERATOR		$\perp L$					
PRORATION OF	FICE	L	1			,	
DEPCO, Inc. Address 800 Cen		044		т.	vac	79761	
Reason(s) for filing	(Check 1	prope	box)	2.4	.Aas		
New Well X					Change in Transp		
Recompletion				011			
Change in Ownership				Casinghead Gas			
Lease Name  R & S Fed.	_	ים בי	ND I		Well No.	Pool N	
Unit Letter	L	_ ;	99	0	Feet Fro	om The_	
Line of Section 17 Townshi					p 158		
DESIGNATION ( Name of Authorized Navajo Cru	Transpo de Oi	rter o	of Oil urch	□ asir	or C ng	Condenso	
Name of Authorized Phillips P				inghed			
If well produces oil give location of tar		ds,		Unit	Sec	17	
If this production COMPLETION I	is comm	ingle	ed wit		from a	ny othe	
Designate Ty		Comp	oletio	n — (		Oil Well	
Data Saudded	Date Spudded			Date Compl. Ready to			
Date Spudded				1	Compri	neddy ic	
8-30-78					10-1		

## MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65

TION TO TRANSPORT OIL AND NATURAL GAS

TRANSPORTER   OIL     GAS		11	III. a s. 1070			
OPERATOR /	JUL 2 0 1979					
Operator	U. U. C.					
DEPCO, Inc.		1 43	TESIA, OFFICE			
800 Central, Odessa	Tevas 79761					
Reason(s) for filing (Check proper box)		Other (Please explain)	,			
New Well X	Change in Transporter of:  Oil Dry Gas					
Change in Ownership	Casinghead Gas Condens					
If change of ownership give name and address of previous owner						
DESCRIPTION OF WELL AND	LEASE					
Lease Name	Well No. Pool Name, Including For	State, Federa	Lease No.   NM 2365			
R & S Fed. Com. 1 Buffalo Valley Penn Federal NM 2365						
Unit Letter L ; 990 Feet From The West Line and 1980 Feet From The South						
Line of Section 17 Tov	vnship 15S Range	28E , NMPM, Cha	aves County			
	TOTAL OF AND NAMED AT CAS					
Name of Authorized Transporter of Oil	or Condensate X	Address (Give address to which appro	oved copy of this form is to be sent)			
Navajo Crude Oil Purch	nasing	Box 175, Artesia New Address (Give address to which appro	w Mexico 88210			
Name of Authorized Transporter of Cas	singhead Gas 🔲 or Dry Gas 🏋	į				
Phillips Pet. Company  If well produces oil or liquids,  Unit Sec. Twp. Rge.		Is gas actually connected?	, Texas /9/62			
give location of tanks.	L 17 15 28	Yes	7-16-79			
If this production is commingled with COMPLETION DATA	th that from any other lease or pool,	give commingling order number:				
Designate Type of Completic	on - (X) Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
8-30-78	10-12-78	9185	9185			
Elevations (DF, RKB, RT, GR, etc.) 3551 GR.	Name of Producing Formation  Morrow	Top Oil/Gas Pay  8936	Tubing Depth 8859			
Perforations			Depth Casing Shoe			
8936-39, 8943-50, 8952-66 9184  TUBING, CASING, AND CEMENTING RECORD						
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
17 1/2	13 3/8	380	375			
7 7/8	9 5/8 4 1/2	1865 9184	500			
4 1/2	2 3/8	8859	TOTAL			
. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a)	fter recovery of total volume of load oi pth or be for full 24 hours)	l and must be equal to or exceed top allow-			
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)			
		Casing Pressure Choke Size				
Length of Test	Tubing Pressure	Cdaing Pressure	ن د د د د د د د د د د د د د د د د د د د			
Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF			
GAS WELL						
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
494 Testing Method (pitot, back pr.)	4 hrs. Tubing Pressure (Shut-in)	12.5 Casing Pressure (Shut-in)	Choke Size			
Back Press.	2261	Pkr	8/64 - 21/64			
. CERTIFICATE OF COMPLIAN	ICE	OIL CONSERV	OIL CONSERVATION COMMISSION			
I harahy navilly that the outer and	regulations of the Oil Conservation	APPROVED JUL 2 3 1979 . 19				
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.		BY Will, Sresset				
		TITLE SUPERVISOR, DISTRICT II				
$\mathcal{X}_{\Lambda}$	1	THE SUPERVISORS  This form is to be filed in compliance with RULE 1104.				
A hason	D. R. Mason	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.				
	nature)					
Chief Clerk	itle)	All sections of this form must be filled out completely for allowable on new and recompleted wells.				
7-19-79		Fitt out only Sections I II III and VI for changes of owner,				
(E	Pate)	well name or number, or transporter, or other such change of condition.  Separate Forms C-104 must be filed for each pool in multiply				