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SANTA FE		1	
FILE		1	7
U.S.G. S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			
Operator			

2-5-82 (Date)

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old Color and C-11 Effective Class Color and C-11	
U.S.G.S.	AUTHORIZATION TO TRA	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
LAND OFFICE		THE THE HATORAL	FEB 1 0 1982	
TRANSPORTER GAS			O. C. D.	
OPERATOR PRORATION OFFICE			ARTESIA, OFFICE	
Operator				
DEPCO, Inc	/			
	Odessa, Texas 79761			
Reason(s) for filing (Check proper b	Change in Transporter of:	Other (Please explain)		
Recompletion v	Oil Dry Go			
Change in Ownership	Casinghead Gas Conde	Convert from in	njection to producer	
If change of ownership give name and address of previous owner	•			
I. DESCRIPTION OF WELL AN				
Lease Name	Well No. Pool Name, Including F		Lease no.	
Artesia, Unit	2 Artesia, Q,	Gry, SA.	ol or Fee State 647	
Unit Letter M ;	330 Feet From The South Lir	ne and 330 Feet From	The West	
Line of Section 26	Township 17s Range	28e , NMPM, E.	ldv County	
I DECICNATION OF TRANSPO	DTED OF OH AND NATURAL CA			
Name of Authorized Transporter of	OIL AND NATURAL GA	Address (Give address to which appro	oved copy of this form is to be sent)	
Navajo Crude Oil Pu		N. Freeman Ave , Arte Address (Give address to which appro	esia, New Mexico 88210	
Phillips Petroleum		4001 Penbrook, Odessa		
If well produces oil or liquids,	Unit Sec. Twp. Rge.		nen	
give location of tanks.	N 26 17 28	Yes	November 1967	
If this production is commingled V. COMPLETION DATA	with that from any other lease or pool,	give commingling order number:		
Designate Type of Comple	tion - (X)	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
11-12-60	8-26-81	2150	2147	
Elevations (DF, RKB, RT, GR, etc.		Top Oil/Gas Pay	Tubing Depth	
3679 GR	Grayburg	2110	2105 Depth Casing Shoe	
2110	-16		2147	
		CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
10" 8	8 5/8" 4 1/2"	564 2147'	75 sx.	
0	2 3/8"	2105	275 sx.	
V. TEST DATA AND REQUEST OIL WELL	FOR ALLOWABLE (Test must be a able for this de	fter recovery of total volume of load oil pth or be for full 24 hours)	and must be equal to or exceed top allow	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	ift, etc.)	
12-28-81	12-30-81 Tubing Pressure	Pump Casing Pressue	Choke Size	
Length of Test			Choke Size	
24 hrs. Actual Prod. During Test	011-Bb1s.	20 Water-Bbls.	Gas-MCF	
ll bbls.	2 bb1s.	9 bbls.	TSTM NEW YORK	
CAC WELL				
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
oppression of the second	NOT.	011 001105511	A TION COMMISSION	
I. CERTIFICATE OF COMPLIA	INCE	OIL CONSERVATION COMMISSION		
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		
		BY W. C. Gressett		
_		TITLE SUPERVISOR.	DISTRICT, U	
111 /1		This form is to be filed in compliance with RULE 1104.		
recold	Lean Standard If this is a request for allowable for a newly drill		wable for a newly drilled or deepened	
•	gnature)	well, this form must be accompanied tests taken on the well in acco	anied by a tabulation of the deviation	
Field Eng	ineer		ast 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.