	NO. OF COPIES RECEIVED						•
-	DISTRIBUTION	ALTERNATION OF CONSERVATION COMMISSION			201011	Б о	
-			NEW MEXICO OIL CO'ISERVATION COMMISSION		551ON	Form C-104 Supersedes Old C-104 and C-110	
-	SANTA FE	_	REQUEST FOR ALLOWABLE				ive 1-1-65
	FILE	AND					
1	U.S.G.S.	AUTH	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
	LAND OFFICE						
Ī	OIL :						
	TRANSPORTER GAS	-				RECE	TVFM
. }		£255 Benne Band Benne Band?					
	OPERATOR						
1.	PRORATION OFFICE			25200 1	Acres Al	CHIAL 4	1046
	Operator			DEPCO, Inc.	S .	JUN 1	1966
				Suite 204	*	<u> </u>	
i	Address			First National Bank	Building	O. C	. C.
	D 0 D 103	A	ta Nove Maretan	Artesia, New Mexico	88210	ARTESIA,	OFFICE
1	P. 0 Box 427 Reason(s) for filing (Check proper box	AFTES	ia, New Mexico	Other (Please			
	[]		in Transporter of:				
ŀ							
	Recompletion	Oil	=	= 1			
	Change in Ownership_ X	Casingl	head Gas Conde	nsate			
	If change of ownership give name	_				07	Nov. Moules
	and address of previous owner	nternatio	onal Oil & Gas C	orporation, P. C	. BOX 4	Z/, AFTESIA	New Mexico
II.	DESCRIPTION OF WELL AND	LEASE	Well No. Pool No	ime, Including Formation		Kind of Lease	,
				,		State, Federal	or Fee Federal
	High Lonesome Penr	ose Unit	2 Hi	gh Lonesome Quee	n	State, 7 daera.	rederai
	Location						
	Unit Letter;	980 Feet F	From The North Li	ne and <u>1980</u>	_ Feet From	The East	
	Line of Section]5 , To	wnship 16	Range	29 , NMPM		Eddy	County
***	DESIGNATION OF TRANSPOR	TED OF O	IL AND NATURAL G	AS			
111.	Name of Authorized Transporter of Oi	X or	Condensate	Address (Give, address t	o which app	roved copy of this	form is to be sent)
	Name of Admostized Transporter of Or	٠. ک		10/11 10 2011	- we	for men	
	High Lonesome Pipe	Line		Abile	re. Texa	S	(a.m. /a.40 ha aant)
	Name of Authorized Transporter of Co	rsinghead Gas	or Dry Gas	Address (Give address	o which app	rovea copy of this	jorm is to be sent;
					_		
	· · · · · · · · · · · · · · · · · · ·	Unit S	Sec. Twp. Rge.	Is gas actually connecte	d? V	Vhen	
	If well produces oil or liquids,	1			i		
	give location of tanks.	1 _ 1		•	,		
		G	15 16 29	No			······································
	If this production is commingled w	ith that from			number:	***	
	If this production is commingled w	ith that from	any other lease or pool	give commingling order			
	COMPLETION DATA				number:		Same Res'v. Diff. Res'v,
			any other lease or pool	give commingling order			Same Res'v. Diff. Res'v,
	Designate Type of Complete	ion - (X)	any other lease or pool	give commingling order			Same Res'v. Diff. Res'v.
	COMPLETION DATA	ion - (X)	any other lease or pool	New Well Workover		Plug Back	Same Res'v. Diff. Res'v.
	Designate Type of Complete	ion — (X)	any other lease or pool	New Well Workover Total Depth		Plug Back	}
	Designate Type of Complete	ion — (X)	any other lease or pool	New Well Workover		Plug Back	}
	Designate Type of Completing	ion — (X)	any other lease or pool	New Well Workover Total Depth		Plug Back	}
	Designate Type of Complete Date Spud led Pool	ion — (X)	any other lease or pool	New Well Workover Total Depth		Plug Back	
	Designate Type of Completing	ion — (X)	any other lease or pool	New Well Workover Total Depth		Plug Back P.B.T.D. Tubing Depth	
	Designate Type of Complete Date Spud led Pool	ion — (X)	any other lease or pool	New Well Workover Total Depth Top Oil/Gas Pay	Deepen	Plug Back P.B.T.D. Tubing Depth	
	Designate Type of Complete Date Spud led Pool	ion — (X)	any other lease or pool	New Well Workover Total Depth	Deepen	Plug Back P.B.T.D. Tubing Depth Depth Casing	Shoe
	Designate Type of Complete Date Spud led Pool	Date Compl	any other lease or pool	New Well Workover Total Depth Top Oil/Gas Pay	Deepen	Plug Back P.B.T.D. Tubing Depth Depth Casing	
	Designate Type of Complete Date Spud led Pool Perforations	Date Compl	any other lease or pool, Cil Well	New Well Workover Total Depth Top Oil/Gas Pay	Deepen	Plug Back P.B.T.D. Tubing Depth Depth Casing	Shoe
	Designate Type of Complete Date Spud led Pool Perforations	Date Compl	any other lease or pool, Cil Well	New Well Workover Total Depth Top Oil/Gas Pay	Deepen	Plug Back P.B.T.D. Tubing Depth Depth Casing	Shoe
	Designate Type of Complete Date Spud led Pool Perforations	Date Compl	any other lease or pool, Cil Well	New Well Workover Total Depth Top Oil/Gas Pay	Deepen	Plug Back P.B.T.D. Tubing Depth Depth Casing	Shoe
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IV.	Designate Type of Completing Date Spud led Pool Perforations HOLE SIZE	Date Compl	any other lease or pool Cil Well Gas Well Ready to Prod. Coducing Formation TUBING, CASING, AND A TUBING SIZE	New Well Workover Total Depth Top Oil/Gas Pay DEPTH S after recovery of total volu	Deepen	Plug Back P.B.T.D. Tubing Depth Depth Casing	Shoe CKS CEMENT
IV.	Designate Type of Complete Date Spud led Pool Perforations HOLE SIZE	Date Compl	any other lease or pool Cil Well Gas Well Ready to Prod. TUBING, CASING, AND & TUBING SIZE	New Well Workover Total Depth Top Oil/Gas Pay	Deepen	Plug Back P.B.T.D. Tubing Depth Depth Casing	Shoe CKS CEMENT
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IV.	Designate Type of Complete Date Spud led Pool Perforations HOLE SIZE	Date Compl	any other lease or pool, Coll Well Gas Well I. Ready to Prod. Coducing Formation TUBING, CASING, ANING & TUBING SIZE WABLE (Test must be able for this control or control o	New Well Workover Total Depth Top Oil/Gas Pay DEPTH S after recovery of total volu	Deepen ET me of load of	Plug Back P.B.T.D. Tubing Depth Depth Casing SAC	Shoe CKS CEMENT
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IV.	Designate Type of Complete Date Spud led Pool Perforations HOLE SIZE TEST DATA AND REQUEST I OIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test	Date Complete Complete Complete Complete Complete Complete Complete Complete Complete Cash Name of Proceedings of Proceedings of Cash Date of Technology Presented Cash Date of	any other lease or pool Oil Well Gas Well I. Ready to Prod. TUBING, CASING, ANING & TUBING SIZE WABLE (Test must be able for this constants)	New Well Workover Total Depth Top Oil/Gas Pay ID CEMENTING RECOR DEPTH Si after recovery of total volumenth or be for full 24 hours Producing Method (Florication) Casing Pressure	Deepen To be pen To	Plug Back P.B.T.D. Tubing Depth Depth Casing SAC sil and must be equilift, etc.)	Shoe CKS CEMENT ual to or exceed top allow
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VI. CERTIFICATE OF COMPLIANCE

Original signed by

J. M. Strader

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.

(Signature)

District Engineer

MAY 2 7 1966

OIL CONSERVATION COMMISSION

JUN 1 0 1966 APPROVED

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TITLE _

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 allowable on new and recompleted wells.

Fill out Sections I, II, III, and VI only 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.

And the second . . .