

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator DEKALB Energy Company		Well API No. 30-015-90994-00
Address 1625 Broadway Denver, CO 80202		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Crow Flats 4 Fed. Com	Well No. 1	Pool Name, Including Formation Diamond Mound Morrow	Kind of Lease State, Federal or Other	Lease No. NM 18831
Location				
Unit Letter S	1980	Feet From The South	Line and 2010	Feet From The West
Section 4	Township 16S	Range 28E	NMPM, Eddy	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	P.O. Box 159 Artesia, NM 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)	
Northern Natural	P.O. Box 1188 Houston, TX 77251-1188	
If well produces oil or liquids, give location of tanks.	Unit S	Sec. 4
	Twp. 16S	Rge. 28E
	Is gas actually connected? yes	When? 1-9-91

If this production is commingled with that from any other lease or pool, give commingling order number.

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X	X					
Date Spudded 6-7-90	Date Compl. Ready to Prod. 7-15-90	Total Depth 9400'		P.B.T.D. 9353'				
Elevations (DF, RKB, RT, GR, etc.) 3654' GR	Name of Producing Formation Morrow	Top Oil/Gas Pay 9092'		Tubing Depth 9029'				
Perforations 9092' - 9263'				Depth Casing Shoe 9353'				

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	400'	425sx Circ 75sx
11"	8-5/8"	2200'	850sx Circ 95sx
7-7/8"	5-1/2"	9353'	1535sx
	2-3/8"	9029'	

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)			
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
		Post ID-2 6-2-91 comp + BH	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF

GAS WELL

Actual Prod. Test - MCF/D 368	Length of Test 24 hours	Bbls. Condensate/MMCF 0	Gravity of Condensate --
Testing Method (prior, back pr.) back pressure	Tubing Pressure (Shut-in) 325	Casing Pressure (Shut-in) 2326 BHP	Choke Size 1-12/64

VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief.

R.L. Flowers, Jr.
Signature
R.L. Flowers, Jr. District Superintendent
Printed Name
4-24-91 (303) 592-4600
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUN 5 1991
By ORIGINAL SIGNED BY
MIKE WILLIAMS
Title SUPERVISOR, DISTRICT II

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.