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TRANSPORTER	OIL	
	GAS	
OPERATOR		
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

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OCT 21 1975

Operator DEPCO, Inc. ✓		O. C. C. ARTESIA, OFFICE	
Address 800 Central, Odessa, Texas 79761			
Reason(s) for filing (Check proper box)		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 Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Conoco-State Com.	Well No. 1	Pool Name, Including Formation Grayburg Atoka North Grayburg Atoka Gas	Kind of Lease State, Federal or Fee State	Lease No. E. 4200
Location Unit Letter K ; 1980 Feet From The South Line and 1650 Feet From The West Line of Section 15 Township 17S Range 29E , NMPM, Eddy County				

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	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	Suite 614, 1st Nat'l. Bank, Odessa, Texas 79760					
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 15	Twp. 17s	Rge. 29e	Is gas actually connected? Yes	When 10-2-75

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

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 8-6-72	Date Compl. Ready to Prod. 11-2-72		Total Depth 11,110		P.B.T.D. 10,835			
Elevations (DF, RKB, RT, GR, etc.) 3562 Gr.	Name of Producing Formation Atoka		Top Oil/Gas Pay 10,130		Tubing Depth 10,308			
Perforations 10,308-16 w/four .42" holes per foot					Depth Casing Shoe 18,881			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2	12 3/4	379	450 sx.
11	8 5/8	3905	950 sx.
7 7/8	4 1/2	10,881	750 sx.
4 1/2	2 3/8	10,308	

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 Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
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 675	Length of Test 24	Bbls. Condensate/MMCF 4	Gravity of Condensate 45
Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 2408	Casing Pressure (Shut-in) Packer	Choke Size 9/64


CERTIFICATE OF COMPLIANCE

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.


D. R. Mason
(Signature)
Chief Clerk
(Title)
10-17-75
(Date)

OIL CONSERVATION COMMISSION

OCT 22 1975

APPROVED _____, 19____
BY 
TITLE SUPERVISOR, DISTRICT II

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 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.