ENERGY AND MINERALS DEPARTMENT		
	Form C-104 Revised 10-01 TION DIVISION Format 06-01- Page 1	
P. O. BO		•
LAND OFFICE	/ MEXICO 87501	
	R ALLOWABLE SEP 08 '88	
	PORT OIL AND NATURAL GAS O. C. D. ARIESIA, OFFICE	
Operator		
DEKALB Energy Company		••••••••••••••••••••••••••••••••••••••
800 Central, Odessa, Texas 79761		
Reoson(s) for filing (Check proper box)	Other (Please explain)	
	y Cas Corporate Name Change	
Change in Ownership Casinghead Gas C		······································
If change of ownership give name DEPCO. Inc. 800 (Central, Odessa, Texas 79761	
II. DESCRIPTION OF WELL AND LEASE		-
Lease Name Well No. Pool Name, Including F		Lease No.
Artesia Unit 48 Artesia Queen	Grayburg SA Stote, Federal or Fee State	647
Location Unit LetterH :2310 Feet From TheNorth_Li	ne and990Feet From TheEast	
Line of Section 3 Township 18 Range	28 , NMPM, Eddy	County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURA	LGAS Addiess (Give address to which approved copy of this form is t	o be sense
Name of Authorized Tronsporter of Oil Condensate		
Navajo Refining Company Name of Authorized Transporter of Cosinghead GasXX or Dry Gas	P. O. Box 175. Artesia. New Mexico 8 Address (Give address to which approved copy of this form is t	o be sensj
Phillips Petroleum Company Unit Sec. Twp. Rge.	4001 Penbrook, Odessa, Texas 79760	······································
If well produces oil or liquids, give location of tanks. L 2 18 28	Yes 9-1-60	
If this production is commingled with that from any other lesse or pool		3
NOTE: Complete Parts IV and V on reverse side if necessary.	3-10-8	AP.
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION	. /
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED MAR 7 1989	, 19
been complied with and that the information given is true and complete to the best of my knowledge and belief.	By Original Signed By	
	Mike Williams	
ρ $($ $)$	This form is to be filed in compliance with RUL	E 1104.
(Signature)	If this is a request for allowable for a newly drill well, this form must be accompanied by a tabulation tests taken on the well in accordance with RULE 11	of the deviat
Chief Production/Clerk (Tule)	All sections of this form must be filled out compl able on new and recompleted wells.	
9-1-88 (Date)	Fill out only Sections I. II. III. and VI for cha well name or number, or transporter, or other such chan	nges of own ge of conditi
10	Separate Forma C-104 must be filled for each p completed wells.	

•

•

•