STATE OF NEW MEXICO	
ENERGY AND MINERALS DEPARTMENT	Form C-104
00. 01 200160 BECEIVED	Revised 10-01-78
	RVATION DIVISION Format 06-01-43
Pile P. O	RECEIVED
	NEW MEXICO 87501
TRANSPORTER OIL REQUEST	SEP 08 '88
OPERATOR	AND O. C. D.
AUTHORIZATION TO TR	
I	ARTESIA, OFFICE
Operator	
DEKALB Energy Company	
Address	
800 Central, <u>Odessa, Texas</u> 79761	
Reeson(s) for filing (Check proper box)	Other (Please explain)
New Well Change in Transporter ol:	
Recompletion Oil	Dry Cos Corporate Name Change
Change in Ownership Casinghead Gas	Condensale
If change of ownership give name DEPCO, Inc., 80	00 Central, Odessa, Texas 79761
i.	
II. DESCRIPTION OF WELL AND LEASE	ting Formation Kind of Lease I lease No.
Lesse Name Well No. Pool Name, Includ	
Dunn B aca 27 Artesia Que	een Grayburg SA Stote, Federal or Fee Federal NM 54184
Location	
Unit Letter I . 660 Feet From The East	Line and 1980 Feet From The South
Unit Letter;; Feet From The	
Line of Section 12 Township 18 Range	• 28 NMPM, Eddy County
Line of Section 12 Township 10 Hang	
III DECICNATION OF THANSDORTER OF OU AND NAT	URALCAS
III. DESIGNATION OF TRANSPORTER OF OIL AND NATI	Asdress (Give address to which approved copy of this form is to be sent)
	Address (Give address to which approved copy of this form is to be seni)
Name of Authorized Transporter of Casinghead Gas or Dry Gas	
If well produces oil or liquids, Unit Sec. Twp. Ro	ae. Is gas actually connected? When
give location of lants. Water Intection Well	1
	pool give communating order numbers $P_{2} \in T \subset N_{-3}$
If this production is commingled with that from any other lease or	
NOTE: Complete Parts IV and V on reverse side if necessary.	
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
	MAR 7 1989
I hereby certify that the rules and regulations of the Oil Conservation Division	have APPROVED
been complied with and that the information given is true and complete to the b	est of the second
my knowledge and belief.	BY Original Signed By
	Mike Williams
	TITLE
$A \downarrow \bigcirc$	This form is to be filed in compliance with RULE 1104.
Llenne R. L. Denney	If this is a request for allowable for a newly drilled or deepend
(Signaytre)	well, this form must be accompanied by a tabulation of the deviation
Chief Production Clerk	tests taken on the well in accordance with AULE 111.
(Tule)	All sections of this form must be filled out completely for allow
	able on new and recompleted wells.
9-1-88	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
(Date)	Separate Forms C-104 must be filed for each pool in multipl
	completed wells.

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RG	Y	AND	MIN	ERALS	DEPARTMENT	

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