

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OPERATOR	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

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Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

SEP 08 '88

O. C. D.
ARTESIA OFFICE

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator
DEKALB Energy Company

Address
800 Central, Odessa, Texas 79761

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Condensate
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

Other (Please explain)
Corporate Name Change

If change of ownership give name and address of previous owner DEPCO, Inc., 800 Central, Odessa, Texas 79761

II. DESCRIPTION OF WELL AND LEASE

Lease Name State 647 AC 711	Well No. 43	Pool Name, including Formation Artesia Queen Grayburg SA	Kind of Lease State, Federal or Fee State	Lease No. 647
Location Flynn, Welch & Yates old records gives location as SE of SE of NE /of Sec. 28				
Unit Letter <u>H</u> : Feet From The Line and Feet From The				
Line of Section 28 Township 18 Range 28, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Navajo Refining Company	P.O. Box 175, Artesia, New Mexico 88210
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Company	4001 Penbrook, Odessa, Texas 79760
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit F Sec. 27 Twp. 18 Rge. 28	Yes July, 1966

If this production is commingled with that from any other lease or pool, give commingling order number: Port ID-3

NOTE: Complete Parts IV and V on reverse side if necessary.

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

R. L. Denney R. L. Denney
(Signature)
Chief Production Clerk
(Title)
9-1-88
(Date)

OIL CONSERVATION DIVISION

APPROVED MAR 7 1989, 19
BY Original Signed By
Mike Williams
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 all wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multi-completed wells.