

NEW MEXICO
OIL CONSERVATION COMMISSION

Drawer DD Artesia, NM

DISTRICT OFFICE #2

May thru Aug. 1977

NO. 2033 R

SUPPLEMENT TO THE OIL PRORATION SCHEDULE

DATE 5/13/77

PURPOSE ALLOWABLE REVISION

Effective 5/1/77, the allowables of the following Depco
Inc. wells in the pool listed below are hereby revised
as indicated.

ARTESIA (Q-G-SA)

Lavers St. #1,2,3,4-P, 4-18-28, increased to 10 BOPD. May total, 310 bbls

June " , 300 "

July " , 310 "

Aug. " , 310 "

Northwest Artesia Unit #2-A, 32-17-28, increased to 41 BOPD.

May total, 1271 bbls

June " , 1230 "

July " , 1271 "

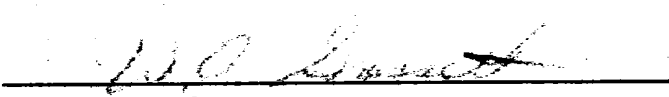
Aug. " , 1271 "

WAG:jw

Depco, Inc.

NRC

OIL CONSERVATION COMMISSION


DISTRICT SUPERVISOR

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TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

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

Operator DEPCO, Inc.			
Address 800 Central, Odessa, Texas 79760			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion	Oil ☒	Dry Gas	☐
Change in Ownership	Casinghead Gas ☐	Condensate	☐

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Levers State	Well No. 1	Pool Name, including Formation Artesia	Kind of Lease State, Federal or Fee	Lease No. State
Location Unit Letter <u>P</u> ; <u>990</u> Feet From The <u>South</u> Line and <u>990</u> Feet From The <u>East</u>				
Line of Section <u>4</u> Township <u>18s</u> Range <u>28e</u> , NMPM, <u>Edo</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)					
<u>Navajo Refining Company, Pipe Line Division</u>	<u>Artesia, New Mexico</u>					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	<u>P</u>	<u>4</u>	<u>18s</u>	<u>28e</u>	<u>No</u>	

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.	Diff. Res.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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 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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. 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.



Chief Production Clerk
(Title)

June 20, 1969
(Date)

OIL CONSERVATION COMMISSION

APPROVED

BY

OIL AND GAS INSPECTOR

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 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.