

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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| TRANSPORTER            | OIL<br>GAS |
| OPERATOR               | ✓          |
| PRODUCTION OFFICE      |            |

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

RECEIVED Form C-104  
Revised 10-01-78  
Format 08-01-83  
Page 1

SEP 08 '88

O. C. D.  
ARTESIA, OFFICE

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

|  |  |
|--|--|
| Operator<br>DEKALB Energy Company ✓  |  |
| Address<br>800 Central, Odessa, Texas 79761  |  |
| Reason(s) for filing (Check proper box)  | Other (Please explain)   |
| <input type="checkbox"/> New Well<br><input type="checkbox"/> Recompletion<br><input type="checkbox"/> Change in Ownership | Change in Transporter of:<br><input type="checkbox"/> Oil<br><input type="checkbox"/> Gas<br><input type="checkbox"/> Condensate<br><input type="checkbox"/> Casinghead Gas<br><input type="checkbox"/> Dry Gas<br><input type="checkbox"/> Condensate |
| 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<br>State 647 AC 731  | Well No.<br>205 | Pool Name, including Formation<br>Artesia Queen Grayburg SA | Kind of Lease<br>State, Federal or Fee State | Lease No.<br>647 |
| Location<br>Unit Letter A : 330 Feet From The North Line and 990 Feet From The East<br>Line of Section 33 Township 18 Range 28, NMPM, Eddy County |                 |   |  |                  |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|   |  |
|---|--|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>         | Address (Give address to which approved copy of this form is to be sent) |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> | 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.   |
| Water Injection Well  | Is gas actually connected? When  |

If this production is commingled with that from any other lease or pool, give commingling order numbers: 3-15-88

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  
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 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.