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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-1 Effective 1-1-65
FILE /-	ALITHORIZATION TO TRA	AND NSPORT OIL AND NATURA	AL GAS
LAND OFFICE	_ AUTHORIZATION TO TRA	MAN OICH OIL AND MATOR	
TRANSPORTER OIL /			RECEIVED
OPERATOR /	_		988 7 1987
PRORATION OFFICE Operator			2 3 3 3 3 4
DEPCO. Inc.			
Address		No Mandaa	gi garin da aya sa
Suite 204, First Reason(s) for filing (Check proper bo	National Bank, Artesia,	Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion	Oil Dry Go	ıs 🔲	
Change in Ownership	Casinghead Gas Conder	nsate	
If change of ownership give name			
and address of previous owner			
DESCRIPTION OF WELL AND	LEASE	4493 3-16-73 me, Including Formation	Kind of Lease
Lease Name	Lease No. Well No. Pool Na	me, incliding rormation	State, Federal or Fee Federal
Dunn A	1 0 Mick	10-12-12-12-15-15-15-15-15-15-15-15-15-15-15-15-15-	
Unit Letter D ; 990	Feet From The North Lir	ne and 330 Feet I	From The West
Olific Detter			
Line of Section 7 T	ownship 185 Range	29E , NMPM,	Eddy County
PERCENTAGION OF TRANSPOL	PATER OF OIL AND NATURAL G	ıs	
Name of Authorized Transporter of C	RTER OF OIL AND NATURAL GA	Address (Live address to which	approved copy of this form is to be sent)
Tevas New Mexico Pi	ipe Line Company	. Midiana layae	
Name of Authorized Transporter of C	Casinghead Gas X or Dry Gas	Address Give address to which	approved copy of this form is to be sent)
Phillips Petroleum		Odessa, Texas Is gas actually connected?	When
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Yes	
L*	with that from any other lease or pool,	1	r:
If this production is commingled to COMPLETION DATA			- 10 D 10 D
Designate Type of Complete	Oil Well Gas Well	New Well Workover Deep	en Plug Back Same Restv. Diff. Res
	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Date Spudded 6-17-67	7-4-67	2719	2719
Elevations (DF, RKB, RT, GR, etc.,		Top Oil/Gas Pay	Tubing Depth
3630 GR	Premier	2634	2622 Depth Casing Shoe
Perforations			2719
2635 to 2639 9 s	hots TUBING CASING AN	D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
11	8 5/8	509	125
7 7/8	4 1/2	2719	330
	2 3/8	2622	
TOTAL AND REQUEST	EOD ALLOWARIE (Test must be	after recovery of total volume of lo	ad oil and must be equal to or exceed top al
OIL WELL	able for this c	the part of the feet from the second	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump,	gas lijt, etc.)
7-5-67	7-7-67 Tubing Pressure	Pump Casing Pressure	Choke Size
Length of Test	I doing Pressure	, , ,	
24 Hr. Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas - MCF
49 Bbls.	38	11 load	
			· OKO Z
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Actual Prod. 1981-MCF/D			1
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
I. CERTIFICATE OF COMPLIA	ANCE	OIL CONS	ERVATION COMMISSION
		APPROVED	, 19
a tester base boom complie	nd regulations of the Oil Conservation d with and that the information give	1) /	harmet
above is true and complete to	the best of my knowledge and belief	BY	y www.
		TITLE	· · · · · · · · · · · · · · · · · · ·
	2	This form is to be fil	led in compliance with RULE 1104.
Pan St.			attamphia for a newly drilled or deepe
Seon Standard (Signature)		well, this form must be ac	ccompanied by a tabulation of the devia n accordance with RULE 111.
	Assistant	- All sections of this f	form must be filled out completely for all
(Title)		able on new and recomple	eted wells. I II III and VI for changes of ow
July 7, 1967		well name or number, or tr	ansporter, or other such change of con-
	i t		nd must be filed for each pool in mult

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.