•			
NO. OF COPIES RECE	1/2		
DISTRIBUTIO			
SANTA FE	T		
FILE	1	V	
U.S.G.S.			
LAND OFFICE			
	OIL		
TRANSPORTER	GAS	1	
OPERATOR	2		
PRORATION OF			
Operator			
DEPCO,	Inc.		
Address			
800 Ce			
	(CARCA)	J. Oper	002

2-11-76

(Date)

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110

FILE	17			KE	QUEST 1	AND	OHADLE			Effective 1-1-6	.5
U.S.G.S.		1 1	AUTH	ORIZATION T			OIL AND N	IATURAL	GAS		_
LAND OFFICE			7.0111	0,1,12,11,10,11					RE	CEIVE	D
	OIL										
TRANSPORTER	GAS								FF	B 1 2 1976	
OPERATOR	2	47							, .	.D 1 & 13/ 0	•
PRORATION OFFIC	E										
Operator .										o. c. c.	
DEFCO, I	ne . 🗠								AR	TEBIA, OFFICE	
Address											
800 Cent	ral.	Odess	sa. Tex	as 79761							
Reason(s) for filing (C	heck prope	er box)	100				Other (Please	explain)			
New Well	\overline{X}		Change	in Transporter of	f;						
Recompletion	_		Oil		Dry Gas						Ī
Change in Ownership			Casingh	ead Gas	Condens	ate					
If change of cwnershi											
and address of previous	ous owner	r									
II. DESCRIPTION OF	WELL.	AND LE	EASE								
Lease Name	WEDE !	ALL DE	Well No	. Pool Name, In	cluding For	mation		Kind of L	ease		Lease No.
Terry Evans	s Com.		1	Red Lak	ke Penn	-		State, Fed	deral or l	Fee Fee	
Location											
G		198	30 East E	rom The NOT	th ine	and	188 0	Feet Fr	om The	East	
Unit Letter	i_		reetr	om The					_		
Line of Section	24	Towns	ship 18	ls R	ange 2	!6e	, NMPM	. E	Eddy		County
Line of Section		704112									
I. DESIGNATION OF	TDANC	DODTE	P OF OU	L AND NATH	RAT. GAS						
Name of Authorized T	ransporter	of Oil	or or	Condensate	10.12	Address (Give address	to which ap	proved	copy of this form is	to be sent)
Navajo Crud				_		Box	175, Art	esia.	New	Mexico 88	3210
Name of Authorized T	ransporter	of Casin	ahead Gas (or Dry Ga	ıs 📆	Address	Give address	to which ap	proved	copy of this form is	to be sent)
Natural Gas						Box	236. Mid	lland.	Теха	s 79701	
		Т,	Unit Se		Rge.	Box 236, Midland, Te					
If well produces oil or	liquids,	1		, ,	26e	-	10.5		3-	15-76	
give location of tanks		i_	G;								
If this production is	commingl	led with	that from	any other lease	or pool, g	give comm	ningling orde	r number:			
IV. COMPLETION DA			_			New Well		Deepen	P	lug Back Same Re	s'v. Diff. Res'v.
Designate Type	of Com	nletion		On wen			1		1		!
Designate Type				<u> </u>	<u>X</u>	X Tatal Da			- p	.B.T.D.	1
Date Spudded		l I		. Ready to Prod.		Total De					
11-4-75			12-1-7				40			9550 ubing Depth	
Elevations (LF, RKB,	RT, GR,	etc.j	Name of Pro	oducing Formation	'n	Top Oil/			'		
3290 Gr.			Morrow	J		<u>92</u>	50		-	9196 epth Casing Shoe	
Perforations											
9250	-58_w/	/4 SPI	<u> </u>							9640	
				TUBING, CAS	ING, AND	CEMEN					
HOLE	SIZE		CASI	NG & TUBING	SIZE		DEPTHS	ET		SACKS CE	
17 1/2			12	3/4			<u>417 </u>			400 sx.	
11			8	5/8			2800			<u>1121 sx.</u>	
7 7/8			4	1/2		9640			 -	250 sx.	
4			2	3/8			9196		1		
V. TEST DATA AND	REQUE	EST FO	R ALLOW	ABLE (Test	must be af	ter recove	ry of total vol	ume of load	loil and	must be equal to or	exceed top allow-
OIL WELL					for this de	pth or be j	or full 24 how	**)	1:64	<u> </u>	
Date First New Oil R	un To Tar	nks	Date of Tes	it		Producir	ng Method (Flo	w, pump, g	as iiji, e		
									- · · · · ·	Choke Size	
Length of Test			Tubing Pre	ssure		Casing F	ctessme.		1	.nore give	
						ļ				Gas-MCF	
Actual Prod. During	Test		Oil-Bbls.			Water - B	bls.		1	2. T.	v.
		-									
											<i>2</i> * *
GAS WELL											~ ~~~~
Actual Prod. Test-N	ICF/D		Length of T	Test		Bbls. Co	ondensate/MM	CF	0	Gravity of Condensa	i•
863.5 A	0F128	27	4 hr	28.		1 11					
Testing Method (pito	t, back pr.	.,	Tubing Pre	sswe (shut-in)	Casing l	Pressur e (Shu	t-in)] <	Choke Size	
		l		· •			ker			16/64	
Back Press		OT TARIO					OIL	CONSE	RVAT	ION COMMISSI	ON
VI. CERTIFICATE O	r COMP	LIANU									
			9 - 4 *	at the Oil Co	e propela-	APPE	OVED MA	R 22	1976_		. , 19
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.				111	1	410	Meth				
			BY_	CN,	4,1	سي ري					
above is true and complete to the cost of				TITLESUPERVISOR, DISTRICT I							
									a since	1	
$\times \mathcal{N}$	1450	2	D.	. R. Masor	<u>n</u>	I	f this is a re	quest for	allowab	le for a newly dri	lled or deepened of the deviation
		(Signat	ture)			well,	this form mu	e well in	sccords	ed by a tabulation nce with RULE 1	11.
Chief Cl	erk		_			11 4	All sections	of this for	m must	be filled out comp	pletely for allow
(Title)					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.