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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

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APR 3 1978

Operator DEPCO, Inc.		O.C.C. ARTESIA, OFFICE	
Address 800 Central, Odessa, Texas 79761			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

If change of ownership give name and address of previous owner P-5754 6-29-78

DESCRIPTION OF WELL AND LEASE			
Lease Name Welch Federal	Well No. 1	Pool Name, including Formation Wildcat Cisco	Kind of Lease State, Federal or Fee Fed
Lease No. 050906			
Location			
Unit Letter G	1980	Feet From The North	Line and 1980
Feet From The East			
Line of Section 8	Township 18S	Range 29E	NMPM, Eddy County

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 Crude Oil Purch Co.	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 Co.	4th & Washington, Odessa, Texas 79760		
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 25	Twp. 18
			Rge. 29
Is gas actually connected?		When 4-14-78	

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


COMPLETION DATA	
Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> New Well <input checked="" type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Res'tv. <input type="checkbox"/> Diff. Res'tv. <input type="checkbox"/>
Date Spudded 10-6-77	Date Compl. Ready to Prod. 1-7-78
Total Depth 11,150	P.B.T.D. 9156
Elevations (DF, RKB, RT, GR, etc.) 3515 GR.	Name of Producing Formation Cisco
Top Oil/Gas Pay 9120	Tubing Depth 9017
Perforations 9120-35 2 JSPF	Depth Casing Shoe 9909
TUBING, CASING, AND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE
17 1/2	13 3/8
11	8 5/8
7 7/8	5 1/2
DEPTH SET	SACKS CEMENT
400	430
2900	1300
9909	500

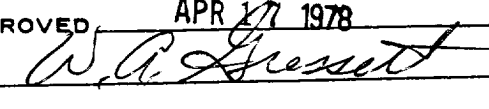
V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 1-7-78	Date of Test 1-31-78	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 6 hrs.	Tubing Pressure 1550	Casing Pressure Packer	Choke Size 14/64
Actual Prod. During Test 112	Oil-Bbls. 112	Water-Bbls. 0	Gas-MCF 223.3

Posted
4-21-78
4-21-78
NCO/PP

GAS WELL	
Actual Prod. Test-MCF/D	Length of Test
Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, 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.	
	D. R. Mason
Chief Clerk	(Title)
3-30-78	(Date)

OIL CONSERVATION COMMISSION	
APPROVED	APR 17 1978
BY	
TITLE	SUPERVISOR, DISTRICT II
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.	