

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

SEP 18 1981

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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

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

If change of ownership give name
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name State 648	Well No. 152	Pool Name, Including Formation E. Millman (Q,Gbr)	Kind of Lease State, Federal or Fee	Lease No. 648
Location Unit Letter A ; 660 Feet From The North Line and 660 Feet From The East				
Line of Section 22 Township 19s Range 28e , NMPM, Eddy County				

I. 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 Purchasers Co.	N. Freeman Ave. 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.	4001 Penbrook, Odessa, Texas 79762					
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 22	Twp. 19s	Rge. 28e	Is gas actually connected? Yes	When 1-25-81

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

II. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well X	Gas Well	New Well	Workover X	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 6-6-59	Date Compl. Ready to Prod. 1-25-81	Total Depth 2663	P.B.T.D. 2380					
Elevations (DF, RKB, RT, GR, etc.) 3421-DF	Name of Producing Formation Grayburg	Top Oil/Gas Pay 1669	Tubing Depth 2300					
Perforations 1669-82, 1725-33, 1778-88, 1808-20, 1861-72, 1972-82, 2172-78, 2126-32			Depth Casing Shoe 2542					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/2	10 3/4		465		75 sx.			
6 1/4	4 1/2		2542		400 sx.			
	2 3/8		2300					

III. 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)

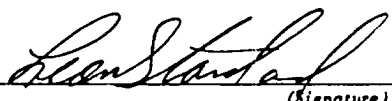
Date First New Oil Run To Tanks 7-1-81	Date of Test 7-26-81	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24	Tubing Pressure 40	Casing Pressure 30	Choke Size
Actual Prod. During Test 94 bbls.	Oil-Bbls. 2	Water-Bbls. 92	Gas-MCF X TSTM

GAS WELL

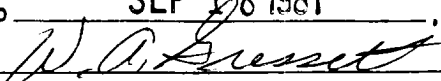
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

IV. 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.


Leon Standard
Field Engineer
9-16-81
(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 18 1981
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.