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

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 1-1-85

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DEC 16 1981

O. C. D.

ARTESIA OFFICE

Operator DEPFO, Inc.	
Address 800 Central, Odessa, Texas 79761	
Reason(s) for filing (Check proper box)	
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"/>
Other (Please explain) Converted from injection back to producer	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name State 648	Well No. 158 E. Millman (Q. Gbr. SA)	Pool Name, Including Formation	Kind of Lease State, Federal or Fee State	Lease No. 648
Location				
Unit Letter G	1980	Feet From The North	Line and 1980	Feet From The East
Line of Section 22	Township 19s	Range 28e	, NMPM, Eddy County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Crude Oil Purchasers	Address (Give address to which approved copy of this form is to be sent) N. Freeman Ave, Artesia New Mexico 88210					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Co.	Address (Give address to which approved copy of this form is to be sent) 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 10-30-81

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well X	Gas Well	New Well	Workover X	Deepen	Plug Back	Same Res'v. X	Diff. Res'v.
Date Spudded 2-10-60	Date Compl. Ready to Prod. 10-30-81		Total Depth 2588		P.B.T.D. 2582			
Elevations (DF, RKB, RT, GR, etc.) 3399 GR	Name of Producing Formation Grayburg		Top Oil/Gas Pay 1878		Tubing Depth 2537			
Perforations 1878-82, 2020-24, 2036-40, 2548-55, 2564-68					Depth Casing Shoe 2588			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 12	CASING & TUBING SIZE 8 5/8		DEPTH SET 440		SACKS CEMENT 75 sx.			
6	4 1/2		2588		328 sx.			
	2 3/8		2537					

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 10-18-81	Date of Test 11-16-81	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure 40	Casing Pressure 20	Choke Size
Actual Prod. During Test 102 bbls.	Oil - Bbls. 3	Water - Bbls. 99	Gas - MCF TSTM

GAS WELL

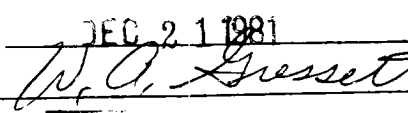
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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.


(Signature) Leon Standard
Field Engineer
(Title)
12-14-81
(Date)

OIL CONSERVATION COMMISSION

APPROVED DEC 21 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.