

NO. OF COPIES RECEIVED		5
DISTRIBUTION		
SANTA FE		1
FILE		1
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	1
	GAS	1
OPERATOR		1
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 1-1-65

RECEIVED

DEC 17 1976

I. Operator
DEPCO, Inc.
Address
800 Central, Odessa, Texas 79761
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

O. G. C.
ARTESIA, OFFICE

II. DESCRIPTION OF WELL AND LEASE

Lease Name DHY State	Well No. 1	Pool Name, Including Formation North Winchester Morrow	Kind of Lease State, Federal or Fee State	Lease No. E 5136
Location Unit Letter F ; 1980 Feet From The North Line and 1980 Feet From The West Line of Section 23 Township 19S Range 28E, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Navajo Crude Oil Purchasing Co.	Address (Give address to which approved copy of this form is to be sent) Box 175, Artesia, New Mexico 88210					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) Box 1384, Jal, New Mexico					
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 23	Twp. 19	Rge. 28	Is gas actually connected? Yes	When 12-16-76

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

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded 11-4-75	Date Compl. Ready to Prod. 1-28-76		Total Depth 11,553		P.B.T.D. 11,440			
Elevations (DF, RKB, RT, GR, etc.) 3383 Gr.	Name of Producing Formation Morrow		Top Oil/Gas Pay 11,025		Tubing Depth 11,047			
Perforations 11,025-47					Depth Casing Shoe			

TUEING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2	12 3/4	417	400
11	8 5/8	2800	1121
7 7/8	5 1/2	11,549	1025
5 1/2	2 3/8	11,047	

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)

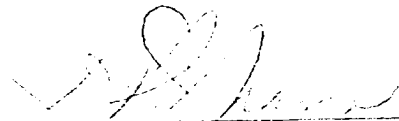
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 1468	Length of Test 5 hrs	Bbls. Condensate/MMCF 5.5	Gravity of Condensate 58.7
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (shut-in) Packer & Crossover	Casing Pressure (shut-in) 2860-1583	Choke Size 7/64 - 20/64

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
(Signature)
Chief Clerk
(Title)
12-16-76
(Date)

OIL CONSERVATION COMMISSION

APPROVED DEC 20 1976, 19
BY W. A. Gressett
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.