NO. OF COPIES REC	EIVED	1	
DISTRIBUTION		5	
SANTA FE		1	
FILE		1	L
U.S.G.S.			<u> </u>
LAND OFFICE			[ 
TRANSPORTER	OIL		
	GAS	1	
OPERATOR		2	
PRORATION OF			
Operator			

III.

			1
DISTRIBUTION 5	NEW MEXICO OIL CO	NSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-11
SANTA FE 1		REQUEST FOR ALLOWABLE	
FILE / L		AND	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TRAN	ISPORT OIL AND NATURAL GA	<b>NS</b>
LAND OFFICE OIL			-
GAS /			
OPERATOR 2			
Depco Inc.			
Address 925 Petroleum C	lub Building, Denver, C	Colorado 80202	
Reason(s) for filing (Check proper box)	Change in Transporter of:	Other (Please explain)	
New We!l	Oil Dry Gas		
Recompletion Change in Ownership X	Casinghead Gas Condens	<b>75</b>	
	International Oil & Gas Denver, Colorado 8020	s Corporation, 825 Pet 02	roleum Club Building
DESCRIPTION OF WELL AND I	Lease No. Well No. Pool Name	e, Including Formation	Kind of Lease
	F 079160A 4 Sout	h Blanco - P.C.	State, Federal or FeeFederal
Unit Letter N : 99	O Feet From The South Line	and 1650 Feet From T	he West
	nship 26N Range	7W , NMPM, Rio A	rriba County
Name of Authorized Transporter of Oil	ER OF OIL AND NATURAL GAS	Address (Give address to which approve	ed copy of this form is to be sent)
Name of Authorized Transporter of Cas	inghead Gas or Dry Gas X	Address (Give address to which approv	ed copy of this form is to be sent)
Name of Authorized Transporter of Cus El Paso Natural		Box 990 Farmington, N	
	Unit Sec. Twp. Rge.	Is gas actually connected? Whe	
If well produces oil or liquids, give location of tanks.		Yes	5-5-53
If this production is commingled wit COMPLETION DATA	h that from any other lease or pool, g	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res
Designate Type of Completion			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
	TUBING, CASING, AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
HOLL SILL			
TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a)	fter recovery of total volume of load oil pth or be for full 24 hours)	and must be equal to or exceed top all
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	ft, etc.)
			Choi (Siz VIII)
Length of Test	Tubing Pressure	Casing Pressure	/QTULITE \
Actual Prod. During Test	Oil-Bhis.	Water-Bbls.	JUNG 1966
GAS WELL		Bbls. Condensate/MMCF	OIL CONT. 3 Gravity of Condensate
Actual Prod. Test-MCF/D	Length of Test		
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
. CERTIFICATE OF COMPLIAN	ICE	ll .	ATION COMMISSION
		APPROVED JUN	6 1966, 19
I hereby certify that the rules and	regulations of the Oil Conservation	Original Signed	by Emery C. Arnold
Commission have been complied	with and that the information given the best of my knowledge and belief.	BY	
BUUTU IN TIME WHEN COMPTON		TITLE SUPERVISO:	R DIST. #3
	1	This form is to be filed in	compliance with RULE 1104.
Ol. Sol.	lie.	1	
- 14:33 XT 11/19	nature)	well, this form must be accomp tests taken on the well in acco	
,,,,,,,	<del>-</del>	II THEFE TEREIS OR LINE WELL AND GOOT	

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.