STATE OF NEW MEXICO
IEREY AND MINERALS DEPARTMENT

710 7 210 14111401	INCO C	, , ,	17 1 1 1
	E1480		
DISTRIBUTION			
BANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

OIL CONSERVATION DIVISION P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE

GAS OPERATOR	ALITHOE		SPORT OIL AND NATU	IDAL CAS			
PRORATION OFFICE	7011101	TEATION TO TRANS		JRAL GAS			
Operator			-				
DEPCO, Inc.					-		
Address							
1000 Petroleum Bui		, CO 80202					
Reason(s) for filing (Check pr		_	Other (Pleas	e explain)			
New Well		Change in Transporter of:					
Recompletion	Oil	Dry G					
Change in Ownership	Casinghe	ad Gas Conde	nsate				
If change of ownership give	name						
and address of previous own			. 			· · · · · · · · · · · · · · · · · · ·	
DESCRIPTION OF WELL				T			
Lease Name	Well No.	Pool Name, Including F	ormation	Kind of Lease	2000		
MKL	5A	Basin Dakota	·	Saxe Federa	CXXXXX	SF079162	
Location							
Unit Letter	1120 Feet Fro	m The South Lir	ne and 1725	Feet From 7	The East		
			_				
Line of Section 6	Township 2	6N Range	7W , NMPM	, Rio A	rriba	County	
DESIGNATION OF TRAN			Acidense (Cine address	to which approx	ed copy of this form is t	o he cost l	
Name of Authorized Transport	er bi Oil or C	ondensate 💟				o de sent,	
Giant Refining Co.	72	D 0 073	P. O. Box 256, Farmington, NM 87401				
Name of Authorized Transport	_	or Dry Gas X	Address (Give address to which approved copy of this form is to be sent)				
Gas Company of New			Box 1899, Bloomfield, NM 87413				
If well produces oil or liquids	Unit Sec	. Twp. Rge.	Is gas actually connect No	ed? Whe	- -		
give location of tanks.				<u>`</u>			
If this production is commin	gled with that from an	y other lease or pool,	give commingling order	r number:			
COMPLETION DATA	10	il Well Gas Well	New Well Workover	Deepen	Plug Back Same Res	'v. Diff. Res'v.	
Designate Type of Co		i X	X i	Deepen	Frag Back Same New		
		i	Total Depth		P.B.T.D.	i	
Date Spudded	Date Compl. R		1				
5-17-82	10-20-8		6850 KB		6804 KB		
Elevations (DF, RKB, RT, GR		icing Formation	Top Oll/Gas Pay				
6101' KB	Dako	ota	6592' KB	_	6638 KB		
Perforations			_				
6592-6606'; 6642-5			A CENEVISING DECOR	2	6848' KB		
			CEMENTING RECOR		SACKS CEM	ENT	
HOLE SIZE		& TUBING SIZE	DEPTH SE	<u> </u>	 		
12-1/4"	8-5,		485' KB		330 sx		
7-7/8"	5-1		6848' KB		1615 (3-Stage)		
	1-1,	/2"	6638' KB				
TEST DATA AND REQUI	EST FOR ALLOWA	3LE (Test must be of oble for this de	fter recovery of total volu pth or be for full 24 hours	me of load oll a ·)	ind must be equal to or e	xceed top attow-	
OIL WELL Date First New Oil Run To Ta	ha Date of Test		Producing Method (Flow		, etc.)		
Date blist Man Oli Man 10 14							
Length of Test	Tubing Pressu		Casing Pressure	 	Choke Size		
Length of 1981	1 4 2 4 7 1 1 2 1						
Annual Bred District Tool	Oil-Bbis.		Water - Bbls.		Gae-MCF	,	
Actual Prod. During Test	0						
	1		L.,,	·····	ļ	, , , , , , , , , , , , , , , , , , , 	
Actual Prod. Teet-MCF/D	Length of Test		Bble. Condensate/MMCF	,	Gravity of Condensate		
1124	3 Hr		0		-		
Testing Method (pitot, back pr.		e (Shut-in)	Cosing Pressure (Shut-	-in)	Choke Size		
Back Pressure	1981	-(_	·	3/4		
			0" 0		·		
ERTIFICATE OF COMP	LIANCE		2-22-83	ואסבחיאוי	ON DIVISION		
			APPROVED	. <u> </u>	· · · · · · · · · · · · · · · · · · ·	19	
hereby certify that the rule	and regulations of t	he Oil Conservation			AAVSZ	_	
ivision have been complied	to the best of my ki	nowledge and belief.	BY 0 16 15				
					SUPERVISOR	nystrict # 3	
\sim	^		TITLE				
$\alpha \subset \Omega \setminus V$	\cap	Ĭ	This form is to	be filed in co	ompliance with RULE	1104.	
Min X. D	Luvenn /	·		est for allows	ble for a newly drille	d or deepened	
	(Signature)		melt this form must	he accompan	ied by a tabulation of ance with RULE 111	the destruction	
roduction Superinte	ndent - Souther	rn Rockies	tests taken on the v	this form must	t be filled out comple	tely for alica-	
2 da de 2001 da per ente	(Title)		able on new and rec	completed wel	18.		
December 1, 1982			FINE THE BOLV S	actions I II	III and VI for chan	ges of owner,	
(Date) December 1, 1982 Well name or number, or transporter, or other such change of consequence					of Countrion		
		į	Separate Forms	C-104 must	be illed for each po	or to munitipit	
		•"	· PRODUCTEU WFILE.				