STATE OF NEW MEXICU ENERGY AND MINERALS DEPARTMENT

	****	Г	
DISTRIBUTE	ON		
SANTA PE			
FILE			
V.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	BAS		
OPERATOR			

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

	Form C-104 Revised 10-1-78							
	SEP1 4 1088							

1.	TRANSPORTER OIL BAS OPERATOR PRORATION OFFICE	AUTH	REC FORIZATION 1		OR ALLOW AND SPORT OIL			OIL CON DIST.	3
-	DEKALB Energy Co	mnany			<u> </u>				
	Address		OO Donyo	· Colo					
	110 16th Street, Reason(s) for filing (Check proper be		ioo, periver	r, L010		202 Other (Pleas	e explain)		
	New Well	•	e in Transporter					O, Inc. wi	11 begin
	Recompletion Change in Ownership	Oil Casing	ghead Gas	Dry G Conde			g under t nergy Com		
	If change of ownership give name and address of previous owner	DEPCO,	Inc. (ad	dress ·	- same a	s above)			
11.	DESCRIPTION OF WELL AND	LEASE	No. Pool Name,	Including F	ormation		Kind of Leas		
	Federal 32	41			tured C1	iff	©(XX, Federa		SF07889
	Location Unit Letter A . 10	170	From The NO	rth	_	1070		Fact	
	20					1070	Feet From '		
	Line of Section 32 To	ownship	27N	Range	11W	, NMPM	. San J	uan	Count
Π.	DESIGNATION OF TRANSPOR		IL AND NAT			ine address t	o which approx	and come of this is	orm is to be sent)
		~							•
	Name of Authorized Transporter of Co Gas Company of New Mex		C or Dry G	as [X]				rque, NM 8	orm is to be sent) 87125
	If well produces oil or liquids,		iec. Twp.	Rge.		ally connecte			37 123
	give location of tanks.	1				YES			
	If this production is commingled w COMPLETION DATA	ith that from							
	Designate Type of Completi	on - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back Sa	me Resty. Diff. Res
	Date Spudded	Date Compl.	. Ready to Prod.		Total Depti	h .		P.B.T.D.	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Pro	oducing Formatio	on .	Top Oll/Go	is Pay		Tubing Depth	
	Perforations			Depth Casing Shoe					
					Septil Guardy and				
	HOLE SIZE	CASIA	TUBING, CAS		CEMENTI	NG RECORE		SACY	S CEMENT
ł	HOLE SIZE	CASIN	O E TOBINO	3,22		DEPTH SE		3000	3 CEMENT
ŧ									
	TEST DATA AND REQUEST F	OR ALLOW	ABLE (Test	must be aft for this dep	er recovery on the for p	of total volum full 24 hours)	e of load oil a	nd must be equal	to or exceed top allo
Ī	Date First New Oil Run To Tanks	Date of Test			Producing h	sethod (Flow,	pump, gas lift	, etc.)	
-	Length of Test	Tubing Pres	euro		Casing Pres	ewe .		Choke Size	
	I Day Say	Oil-Bbis.			Water - Bbla.			Gas - MCF	
	Actual Prod. During Test	Cir-Bbie.			#4.5 <i>Bb</i> .6.			Ods-MCr	
'-					,,,,				
٦	GAS WELL Actual Prod. Test-MCF/D	Length of Te	et		Bbis. Conde	nagte/MMCF	·	Gravity of Conde	meate
-	Testing Method (pitot, back pr.)	Tubing Press	we (Shut-in)		Cosing Pres	sure (Sbut-i		Choke Size	
:. c	ERTIFICATE OF COMPLIANC	CE					NSERVATION OF	DN DIVISION	1
D	hereby certify that the rules and re prision have been complied with bove is true and complete to the	and that the	information g	iven	APPROV	3.	<u> ۱۷۲. ۸</u>	hang	, 19
•	POAS IS LINE and combiste to me		SUPERVISION DISTRICT # 3						
	of de		TITLE _	form in to b	e filed in co	mpliance with	BULE 1104.		
_	Hall II Vyles	/			If this	a ia a reque	at for allows	ble for a newly	drilled or deepene
_	District Production Su	perintend	lent		tosts take	n on the 🌬	li in accorde	ince with RULI	ion of the deviation 111. completely for allow
	September 12, 1988				Fill	out only Se	ctions I. II.	III. and VI for	changes of owner
_	(Dat	e)		11	well name	or number,	or transporter	or other such c	change of condition

Submit 5 Copies
Apprepriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Azzec, NM 87410

DISTRICT II P.O. Drawer DD, Antesia, NM 88210

REQUEST FOR ALLOWABLE AND AUTHORIZATION

		TO THA	NSP	OHI OIL	AND INA	UNAL GA	Well A			
Decaus Dreyfus Natural Gas Corp.							30-045-24269			
Idents										
14000 Quail Springs P	arkway	, Suite	600	0 - Oklal	noma Cit	y, OK 7	3134			
ason(s) for Filing (Check proper box)					Other	(Please expla	ui)			
w Well	0"	Change in	Dry G	[]						
completion X	Oil Casinghea		Conde	-						
		_		ny - 162	5 Broadw	av - Den	ver, CO	80202		
address of previous operator DEK	ALB En	ergy co	Jiipa	11y 102	3 21000					
DESCRIPTION OF WELL	AND LE	ASE	15	Non Industria	- Formation		Kind o	(Lease	L	ease No.
ease Name		Well No.	Poor	Name, Includio West K	utz PC			ederal XXX Fex X		078896
Federal 32		J	<u> </u>						_	
Unit Letter A	. :	1070	Feet I	From TheN	orth Line	and	70F	et From The	East	Line
22	27	'N		_ 1	.1W NA	APM, Sar	n Juan			County
Section 32 Township	21	N	Rang	<u>e</u>	110	44 1411				
. DESIGNATION OF TRAN	SPORTE	ER OF O	IL A	ND NATUI	RAL GAS			copy of this for	n in to he e	ent)
ame of Authorized Transporter of Oil		or Conde	essie		Address (Giv	e address to w	nich approved	copy of this join		174)
ame of Authorized Transporter of Casing	head Gas		or D	ry Gas X	Address (Giv	e address to w	hich approved	copy of this for	n is to be s	ens)
Gas Company of New M					P.O.	Box 2640	<u>0 - Albu</u>	querque,	NM 8	/125
well produces oil or liquids,	Unit	Sec.	Twp.	. Rge.	is gas actuali Ye		When	7		
ve location of tanks.	1	<u> </u>		cive comminel						
this production is commingled with that /. COMPLETION DATA	Irom any o	ruet teams of	poor,	Ste consumb	ing order nam					
		Oil Wel	1	Gas Well	New Well	Workover	Deepen	Plug Back S	ame Res'v	Diff Res'v
Designate Type of Completion					Total Depth	<u>l · </u>		P.B.T.D.		
ate Spudded	Date Cor	npi. Ready t	io Prod	L	Total Depair			F.B.1.D.		
levations (DF, RKB, RT, GR, etc.)	Name of	Producing F	omati	ion	Top Oil/Gas Pay			Tubing Depth		
Revauons (DF, RAB, RI, OR, SIC.)							Dark Carina	Depth Casing Shoe		
erforations								Depth Casing	SUGE	
		TUDING	CA	SING AND	CEMENT	NG RECO	RD	_1		
HOLE SIZE		ASING & T				DEPTH SE		S	ACKS CEI	MENT
HOLE SIZE	 	<u> </u>	00	0 0.02						
	<u> </u>									
								 		
	ST FOR	A11700	VARI	F	1			1		
. TEST DATA AND REQUE OIL WELL (Test must be after	SIFUR	ALLON	e of lo	ad oil and mus	s be equal to o	r exceed top a	llowable for th	is depth or be fo	r full 24 he	ours.)
Date First New Oil Run To Tank	Date of				Producing N	lethod (Flow,	pump, gas lift,	etc.)	GE	IVE
								Charles	<u> </u>	
Length of Test	Tubing	Pressure			Casing Pres	Casing Pressure			OV 2	1992
Actual Prod. During Test	Oil - Bb	<u> </u>			Water - Bbls.			Gas- MCF	<u> </u>	
Actual Floor During Feet	On a Be									
GAS WELL				·						
Actual Prod. Test - MCF/D	Length	of Test			Bbls. Cond	ensate/MMCF		Gravity of C	onden sate	
					Carian Day	sure (Shut-in)	 	Choke Size		***
Testing Method (pilot, back pr.)	Tubing	Pressure (Si	hust-iss)		Cating Free	Marie (Stick-III)		C.O.D. D.E.S		
		OF COL		ANCE	<u> </u>					
VI. OPERATOR CERTIFICATION I hereby certify that the rules and reg	CAIL	Jr CON	LPLI sevali	MINCE	H	OIL CC)NSER\	/ATION	DIVIS	ION
Division have been complied with an	d that the i	nformation (given #	sbove						
is true and complete to the best of m	y knowledg	e and belief			Da	te Approv	/ed	NOV	<u>- 2 100</u>	2
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Vanne 1	dia	<u> </u>			Ву			<u> </u>	\mathcal{A}_{-}	
Signature Ronnie K. Irani		Vic		resident			e:	IDEDINA		X
Printed Name October 16, 1992			Ti	ue 749–1300	Titl	е		PERVISOR	DISTE	HCT #3
Date				749-1300 one No.						
2-11			•		11				·	

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.