

DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT Artesia, NM 86410

Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM 37601

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Vance Federal Com

9. WELL NO.

3

10. FIELD AND POOL OR WILDCAT

Pecos Slopes Abo

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 26, T7S-R26E

12. COUNTY OR PARISH 13. STATE

Chaves

NM

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

91 JUN 13 PM 2:37

OLD FARMINGTON, N.M.

RECEIVED

OCT 30 1991

O. C. D.

ARTESIA OFFICE

1. OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

DEKALB Energy Company

3. ADDRESS OF OPERATOR

1625 Broadway Denver, CO 80202

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface

660'FSL, 660'FWL SW SW

14. PERMIT NO

API 30-005-61508

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3794'GR

3804'KB

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANS

(Other)

Gas Analysis

NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

The Vance Federal Com No. 3 well has no H₂S concentration.

18. I hereby certify that the foregoing is true and correct

SIGNED

L. J. Flewett

TITLE District Superintendent

DATE

6/6/91

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

TRANSWESTERN PIPELINE COMPANY
(SUBSIDIARY OF ENRON CORP.)

GAS QUALITY TEST REPORT

PRODUCER DEPCO INC STATION NO. 1577-1
FIELD ISLER EFFECTIVE DATE 10/20/86
RESERVOIR ABO LAB NUMBER 4
STATION NAME VANCE FED #3

COMPONENTS	SPECIFIC GRAVITY	MOLE FRACTION	LIQUEFIABLE HYDROCARBONS	COMPONENT GPM	GPM CONTENT
NITROGEN	.9672	.0503	PROANE	27.514	.4870
CARBON DIOXIDE	1.5195	.0004	ISOBUTANE	32.698	.0916
HELIUM	.1382		N-BUTANE	31.510	.1765
OXYGEN	1.1048	.0000	LPG		.7550
HYDROGEN SULFIDE	1.1766	.0000	ISOPENTANE	36.582	.0622
WATER VAPOR	.6220	.0000	N-PENTANE	36.213	.0616
			HEXANES	41.111	.0534
METHANE	.5539	.3729	HEPTANES+	46.126	.0646
ETHANE	1.0382	.0442	NATURAL GASOLINE		.2418
PROPANE	1.5225	.0177	TOTAL LIQUEFIABLE GPM		.9968
ISOBUTANE	2.0068	.0028	WATER VAPOR CONTENT:		
N-BUTANE	2.0068	.0056	GAS MIXTURE STATIC PSIG		160.0
ISOPENTANE	2.4911	.0017	FLOWING GAS TEMP (F)		60.0
N-PENTANE	2.4911	.0017	WATER VAPOR DEW POINT (F)		44.0
HEXANES	2.9753	.0013	LBS WATER VAPOR / MMCF		42.0
HEPTANES+	3.5807	.0014	DEHY INSTALLED (TW)		NO
COMPOSITION-----		1.0000	INSTRUMENT TYPE		RAM
			MOL FRACTION		.0009
MIXTURE SPECIFIC GRAVITY			SULFUR CONTENT (GR. PER 100 CF)		
CALC. FROM ANAL. (REAL)		.641	HYDROGEN SULFIDE		
DETERMINED BY TEST INST.		.642	MERCAPTANS		
INST. VERIFIED		OCT	SULFIDES		
MIXTURE HEATING VALUE			RESIDUALS		
(BTU/CF @ 14.73 PSIA, 60F, SAT.)			TOTAL SULFUR		
CALCULATED FROM ANALYSIS		1046	MOLE FRACT H2S		
BY CALORIMETRY		NONE	COMPRESSIBILITY (Z)		.9976

R: 17:09 OCT 22, 1986

ANALYST *Jimmy Lee* [TW]