| NO. OF COPIES RECEIVER         DISTRIBUTION         SANTA FE         FILE         U.S.G.S.         LAND OFFICE         I RANSPORTER         OIL         GAS         OPERATOR         I PRORATION OFFICE         Operator         DEPCO, INC.         Address         800 Central, Odessa | REQUEST F                                                               | NEERVATION COMMISSION<br>OT ALLOWABLE<br>AND<br>ISPORT OIL AND NATURAL G<br>FEB 1 8 19<br>O. C. D.<br>ARTEDIA, OFFIC                                                         | 83                                                                     |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|--|--|
| Reason(s) for filing (Check proper box<br>New Well X<br>Recompletion<br>Change in Ownership                                                                                                                                                                                              | )<br>Change in Transporter of:<br>Oi: Dry Gas<br>Casinghead Gas Condens |                                                                                                                                                                              |                                                                        |  |  |
| If change of ownership give name<br>and address of previous owner                                                                                                                                                                                                                        |                                                                         |                                                                                                                                                                              |                                                                        |  |  |
| I. DESCRIPTION OF WELL AND                                                                                                                                                                                                                                                               | Well No. Pool Name, Including Fo                                        |                                                                                                                                                                              |                                                                        |  |  |
| Rose Federal Com                                                                                                                                                                                                                                                                         | 12 Pecos Slopes A                                                       | bo                                                                                                                                                                           | <sup>1 or Fee</sup> Federal NM36408                                    |  |  |
| Location<br>Unit Letter C ; 66                                                                                                                                                                                                                                                           | 0Feet From TheNorth                                                     | and 1980 Fret From T                                                                                                                                                         | The West                                                               |  |  |
|                                                                                                                                                                                                                                                                                          | wnship 5S Range 25                                                      |                                                                                                                                                                              | County                                                                 |  |  |
|                                                                                                                                                                                                                                                                                          |                                                                         |                                                                                                                                                                              |                                                                        |  |  |
| II. DESIGNATION OF TRANSPOR                                                                                                                                                                                                                                                              | TER OF OIL AND NATURAL GA                                               | S<br>Address (Give address to which appro                                                                                                                                    | ved copy of this form is to be sent)                                   |  |  |
|                                                                                                                                                                                                                                                                                          | singhead Gas 📋 or Dry Gas 👿                                             | Address (Give address to which approved copy of this form is to be sent)                                                                                                     |                                                                        |  |  |
| Name of Authorized Transporter of Ca<br>Transwestern Pipeli                                                                                                                                                                                                                              |                                                                         | Suite 614, 1st Nat'l Bank, Odessa, Texas 79760                                                                                                                               |                                                                        |  |  |
| If well produces oil or liquids,                                                                                                                                                                                                                                                         | Unit Sec. Twp. Ege.                                                     | Is gas actually connected? Wh                                                                                                                                                |                                                                        |  |  |
| give location of tanks.                                                                                                                                                                                                                                                                  | C 21 5 25                                                               | No- y.a.                                                                                                                                                                     | laiting on P.T.                                                        |  |  |
| If this production is commingled w<br>V. COMPLETION DATA                                                                                                                                                                                                                                 | ith that from any other lease or pool,                                  |                                                                                                                                                                              | Plug Back Same Res'v. Diff. Res'v.                                     |  |  |
| Designate Type of Complet                                                                                                                                                                                                                                                                | $ion (\mathbf{X})$                                                      | New Well Workover Deepen                                                                                                                                                     |                                                                        |  |  |
| Date Spudded                                                                                                                                                                                                                                                                             | Date Compl. Ready to Prod.                                              | Total Depth                                                                                                                                                                  | P.B.T.D.                                                               |  |  |
| 12-26-83                                                                                                                                                                                                                                                                                 | 2-9-83<br>Name of Producing Formation                                   | 4220'<br>Top Oll/Gas Pay                                                                                                                                                     | 4205<br>Tubing Depth                                                   |  |  |
| Elevations (DF, RKB, RT, GR, etc.)                                                                                                                                                                                                                                                       |                                                                         | 3705                                                                                                                                                                         | 3630                                                                   |  |  |
| 3759 GR                                                                                                                                                                                                                                                                                  | Abo                                                                     |                                                                                                                                                                              | Depth Casing Shoe                                                      |  |  |
| 3705-4175' 434                                                                                                                                                                                                                                                                           | l" holes                                                                |                                                                                                                                                                              | 4219                                                                   |  |  |
|                                                                                                                                                                                                                                                                                          |                                                                         | D CEMENTING RECORD                                                                                                                                                           | SACKS CEMENT                                                           |  |  |
| HOLE SIZE                                                                                                                                                                                                                                                                                | CASING & TUBING SIZE                                                    | 50'                                                                                                                                                                          | 250 sx                                                                 |  |  |
| 14 3/4"                                                                                                                                                                                                                                                                                  | 10 3/4"                                                                 | 1002'                                                                                                                                                                        | 700 sx. Circ. 150 sx.                                                  |  |  |
| 7 7/8"                                                                                                                                                                                                                                                                                   | 4 1/2"                                                                  | 4219'                                                                                                                                                                        | <u>1600 sx. Circ. 120 sx.</u>                                          |  |  |
|                                                                                                                                                                                                                                                                                          | 2 3/8"                                                                  | <u>3630'</u>                                                                                                                                                                 | I and must be equal to or exceed top allow-                            |  |  |
| V. TEST DATA AND REQUEST<br>OIL WELL                                                                                                                                                                                                                                                     | FOR ALLOWABLE (Test must be a able for this de                          |                                                                                                                                                                              | l and must be equal to or exceed top allow-                            |  |  |
| Date First New Oil Run To Tanks                                                                                                                                                                                                                                                          | Date of Test                                                            | Producing Method (Flow, pump, gas )                                                                                                                                          | lift, etc.)                                                            |  |  |
|                                                                                                                                                                                                                                                                                          | Tubing Pressure                                                         | Casing Pressure                                                                                                                                                              | Choke Size                                                             |  |  |
| Length of Test                                                                                                                                                                                                                                                                           |                                                                         |                                                                                                                                                                              |                                                                        |  |  |
| Actual Prod. During Test                                                                                                                                                                                                                                                                 | Oil-Bbls.                                                               | Water-Bbls.                                                                                                                                                                  | Gas - MCF                                                              |  |  |
|                                                                                                                                                                                                                                                                                          |                                                                         |                                                                                                                                                                              |                                                                        |  |  |
| GAS WELL                                                                                                                                                                                                                                                                                 |                                                                         |                                                                                                                                                                              | Gravity of Condensate                                                  |  |  |
| Actual Prod. Test-MCF/D                                                                                                                                                                                                                                                                  | Length of Test                                                          | Bbis. Condensate/MMCF                                                                                                                                                        |                                                                        |  |  |
| 1132<br>Testing Method (pitot, back pr.)                                                                                                                                                                                                                                                 | 4 Hrs.<br>Tubing Pressure (Shut-in)                                     | Casing Pressure (Shut-in)                                                                                                                                                    |                                                                        |  |  |
| Back Pr.                                                                                                                                                                                                                                                                                 | 967                                                                     | 1126                                                                                                                                                                         | 13.5 - 30/64                                                           |  |  |
| VI. CERTIFICATE OF COMPLIA                                                                                                                                                                                                                                                               | NCE                                                                     |                                                                                                                                                                              | ATION COMMISSION                                                       |  |  |
|                                                                                                                                                                                                                                                                                          |                                                                         | APPROVED AUG U &                                                                                                                                                             | 983, 19                                                                |  |  |
| I hereby certify that the rules and regulations of the Oil Conservation<br>Commission have been complied with and that the information given<br>above is true and complete to the best of my knowledge and belief.                                                                       |                                                                         | APPROVED     Original System by       BY     Lestie A. Clements                                                                                                              |                                                                        |  |  |
|                                                                                                                                                                                                                                                                                          |                                                                         | L Cumervisor District P                                                                                                                                                      |                                                                        |  |  |
|                                                                                                                                                                                                                                                                                          |                                                                         |                                                                                                                                                                              |                                                                        |  |  |
| $\rho$ , $\Lambda$                                                                                                                                                                                                                                                                       | -                                                                       | This form is to be filed in                                                                                                                                                  | a compliance with RULE 1104.<br>owable for a newly drilled or deepened |  |  |
| R.L. KJenn                                                                                                                                                                                                                                                                               | e R. L. Denney                                                          |                                                                                                                                                                              | NARIAN NV B TRANVELION OF LUG GEVIELIUN                                |  |  |
| Chief Production C                                                                                                                                                                                                                                                                       | lerk                                                                    | well, this form must be accompanied by a thentield in the set of the well in accordance with RULE 111.<br>All sections of this form must be filled out completely for allow- |                                                                        |  |  |
|                                                                                                                                                                                                                                                                                          | (Title)                                                                 | able on new and recompleted                                                                                                                                                  | wells.                                                                 |  |  |
| 2-17-83                                                                                                                                                                                                                                                                                  | ([]                                                                     | Fill out only Sections I, II, III, and VI for changes of owner,<br>well name or number, or transporter, or other such change of condition.                                   |                                                                        |  |  |
|                                                                                                                                                                                                                                                                                          | (Date)                                                                  | Separate Forme C-104 m                                                                                                                                                       | ust be filed for erch pool in multiply                                 |  |  |

|        | J                                                                                              |                                                                                                                                                                     | RECEIVED                                    | P. D. Box 205                                                                          | S ROSWELL, NEW MEXICO 8826<br>Telephones: Artesia 505/745-675<br>Roswell 505/623-507 |  |  |
|--------|------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|----------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|--|--|
|        |                                                                                                |                                                                                                                                                                     | FEB 1 8 1983<br>O. C. D.<br>ARTESIA, OFFICE | January 10,                                                                            |                                                                                      |  |  |
|        |                                                                                                | ł                                                                                                                                                                   |                                             |                                                                                        | FEB 181233                                                                           |  |  |
|        | Iapeo, Inc. V<br>800 Central<br>Cleasa, Texas 797ol                                            |                                                                                                                                                                     |                                             |                                                                                        | Ю. С. D.<br>Арися А, С 97 С.В                                                        |  |  |
|        | Fa: Rosa Fed. Com.                                                                             | #l.2                                                                                                                                                                |                                             |                                                                                        |                                                                                      |  |  |
|        | Gintlemen:                                                                                     |                                                                                                                                                                     |                                             |                                                                                        |                                                                                      |  |  |
|        | The following is a Deviation Survey of the above well located in Chaves<br>County, New Mexcip. |                                                                                                                                                                     |                                             |                                                                                        |                                                                                      |  |  |
|        | 6257 - 1<br>10027 - 1<br>14917 - 1<br>19917 - 1                                                | $500^{+} = 3/4^{\circ}$ $625^{+} = 1^{-\circ}$ $1002^{+} = 1^{-\circ}$ $1492^{+} = 1^{-} 1.42^{\circ}$ $1992^{+} = 1^{-} 1.22^{\circ}$ $2490^{+} = 1.(1/2)^{\circ}$ |                                             | 2778' - 1 1<br>2997' - 1 1<br>3414' - 1 1<br>3576' - 1 1<br>4066' - 1 1<br>4220' - 1 1 | /4°<br>/ <u>4</u> °<br>/2°                                                           |  |  |
|        |                                                                                                |                                                                                                                                                                     |                                             | Tours very                                                                             | or ly.                                                                               |  |  |
|        |                                                                                                |                                                                                                                                                                     |                                             | WEK DRILLIN.                                                                           | 3 GB., 1MD.                                                                          |  |  |
|        |                                                                                                |                                                                                                                                                                     |                                             | Renord II<br>Arnold Newk                                                               |                                                                                      |  |  |
| CO<br> | UTAPE OF NEW MEXIC                                                                             | 2)                                                                                                                                                                  |                                             |                                                                                        |                                                                                      |  |  |
|        | COUNTY OF CHAVES                                                                               | )                                                                                                                                                                   |                                             |                                                                                        |                                                                                      |  |  |
|        | The foregoing                                                                                  | The foregoing was acknowledged before me this 10 20 Day of<br>fancing . 1933 by Arnold Newkirk.                                                                     |                                             |                                                                                        |                                                                                      |  |  |
|        | My Commission Extl                                                                             | y Commission Explose:                                                                                                                                               |                                             |                                                                                        | Alexandra Mantere                                                                    |  |  |
|        | April 10, 1984                                                                                 |                                                                                                                                                                     |                                             |                                                                                        |                                                                                      |  |  |

## NEW MEXICO OIL CONSERVATION DIVISION

P. O. DRAWER "DD"

ARTESIA, NEW MEXICO 88210

AUG 04 1983

O. C. D. ARTEGIA, OFFICE

:

NOTICE OF GAS CONNECTION

DATE \_\_\_\_\_ August 2, 1983

This is to notify the Oil Conservation Division that connection for the

| purchase of gas from the |             | Depco, Inc.                            |
|--------------------------|-------------|----------------------------------------|
|                          |             | Operator                               |
|                          |             | С                                      |
| Rose Fed. Com.           |             | #12 - Unit <del>Letter Unknown</del> - |
| Lease                    |             | Well Unit                              |
|                          |             | Perro 2 Urpl                           |
| 21-5S-25E, Chaves Co.    |             | <u>Undesignated</u> (Abo)              |
| S.T.R.                   |             | Pool                                   |
|                          |             |                                        |
| Transwestern             | was made on | July 27, 1983                          |
| Name of Purchaser        | -           |                                        |
|                          |             | Transwestern Pipeline Company          |
|                          | _           | Company                                |
|                          |             | a.K. Berdy A.K. Berdy                  |
|                          | _           | Representative                         |
|                          | -           | Jr. Analyst Contract Administration    |
|                          |             | Title                                  |
|                          |             |                                        |
|                          |             |                                        |

cc: Operator Oil Conservation Division P. O. Box 2088 Santa Fe, New Mexico 87501