

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		✓
FILE		✓
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	✓
OPERATOR		✓
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

RECEIVED

JAN 28 1983

I. Operator DEPCO, INC. ✓ O. C. D.
Address 800 Central Odessa, Texas 79761 ARTESIA OFFICE
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Rose Federal	5	Pecos Slopes Abo	State, Federal or Fee <u>Federal</u>	NM 36408
Location Unit Letter <u>M</u> ; <u>660</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>West</u> Line of Section <u>18</u> Township <u>5S</u> Range <u>25E</u> , NMPM, <u>Chaves</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
<u>Transwestern Pipeline Company</u>	<u>Suite 614, 1st Nat'l Bank, Odessa, Texas 79760</u>	
If well produces oil or liquids, give location of tanks.	Unit <u>M</u>	Sec. <u>18</u>
	Twp. <u>5</u>	Pge. <u>25</u>
	Is gas actually connected? <u>NO</u> When <u>5-9-83</u> <u>Waiting on Pipeline</u>	

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded <u>12-6-82</u>	Date Compl. Ready to Prod. <u>1-5-83</u>		Total Depth <u>4250</u>		P.B.T.D. <u>4193'</u>			
Elevations (DF, RKB, RT, GR, etc.) <u>3911 GR</u>	Name of Producing Formation <u>Abo</u>		Top Oil/Gas Pay <u>3717'</u>		Tubing Depth <u>3644'</u>			
Perforations <u>3717-3868 46 - .44" holes</u>					Depth Casing Shoe <u>4249'</u>			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
<u>14 3/4"</u>	<u>10 3/4"</u>		<u>999'</u>		<u>900 sx. Cite.</u>			
<u>7 7/8"</u>	<u>4 1/2"</u>		<u>4249'</u>		<u>1550 sx. TOC 220'</u>			
	<u>2 3/8"</u>		<u>3644'</u>					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D <u>1895</u>	Length of Test <u>4 hrs.</u>	Bbls. Condensate/MMCF <u>0</u>	Gravity of Condensate <u>0</u>
Testing Method (pitot, back pr.) <u>Back pr.</u>	Tubing Pressure (shut-in) <u>987</u>	Casing Pressure (shut-in) <u>1101 BHP</u>	Choke Size <u>15.5-48/64</u>

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

R. L. Denney R. L. Denney
(Signature)
Chief Production Clerk
(Title)
1-27-83
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 13 1983, 19____
Original Signed By
BY Leslie A. Clements
TITLE Supervisor District II

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

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.

NEW MEXICO OIL CONSERVATION DIVISION

P. O. DRAWER "DD"

ARTESIA, NEW MEXICO 88210

RECEIVED

MAY 12 1983

O. C. D.
ARTESIA, OFFICE

NOTICE OF GAS CONNECTION

DATE May 10, 1983

This is to notify the Oil Conservation Division that connection for the
purchase of gas from the Depco, Inc.
Operator

Rose - Fed.

Lease

H
#5 - Unit Letter ~~Unknown~~
Well Unit

18-5S-25E, Chaves County

S.T.R.

Pecos Slope
Wildcat (Abo)

Pool

Transwestern
Name of Purchaser

was made on May 9, 1983

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