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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

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AUG 11 1978

Operator DEPCO, Inc.		O. C. C. ARTESIA, OFFICE
Address 800 Central, Odessa, Texas 79761		
Reason(s) for filing (Check proper box) New Well <input checked="" type="checkbox"/> Change in Transporter of: Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Ownership <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		Other (Please explain)

If change of ownership give name  
and address of previous owner

DESCRIPTION OF WELL AND LEASE		South Sand Ranch Atoka Gas R-5838	
Lease Name Beall Federal	Well No. 1	Pool Name, Including Formation Wildcat	Kind of Lease State, Federal or Fee Federal
Location Unit Letter G ; 1980 Feet From The North Line and 2230 Feet From The East		Lease No. 0557565	
Line of Section 17 Township 11S Range 30E		, NMPM, Chaves County	

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Navajo Crude Oil Purch. Co.	Address (Give address to which approved copy of this form is to be sent) Box 175, Artesia, New Mexico 88210	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) Box 1384, Jal, New Mexico	
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 17
	Twp. 11S	Rge. 30E

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

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 7-22-75	Date Compl. Ready to Prod. 5-22-77	Total Depth 9434	P.B.T.D. 9400					
Elevations (DF, RKB, RT, GR, etc.) 3942 Gr.	Name of Producing Formation Atoka	Top Oil/Gas Pay 9096	Tubing Depth 9158					
Perforations 9096-9182			Depth Casing Shoe 9433					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2	13 3/8	370	300
11	8 5/8	2850	550
7 7/8	4 1/2	9433	500

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

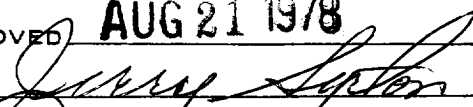
Actual Prod. Test-MCF/D 249.9	Length of Test 4 hrs.	Bbls. Condensate/MMCF 5.2	Gravity of Condensate 57
Testing Method (pitot, back pr.) Back Press.	Tubing Pressure (shut-in) 1780	Casing Pressure (shut-in) Packer	Choke Size 10/64 - 14/64

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.

  
D. R. Mason  
(Signature)  
Chief Clerk  
(Title)  
8-10-78  
(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 21 1978  
BY   
TITLE SUPERVISOR DISTRICT I

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.

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OIL CONSERVATION COMM.  
BOBBS, N. M.