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DISTRIBUTION
LANTA FE 1 1
ILE 1 V
S.G.S.
LAND OFFICE
TRANSPORTER OIL 1
GAS 1
OPERATOR 1
PRORATION OFFICE

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

Form O-104
Supersedes Old O-104 and
Effective 1-1-65

RECEIVED

SEP 26 1979

I.

Operator
Coquina Oil Corporation
Address
P. O. Drawer 2960, Midland, Texas 79702
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter oil ☐
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Discontinued Gas ☐ Condensate ☒
Other (Please explain)
Effective 10/1/79

O. C. C.
ARTESIA, OFFICE

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Boyd X Morrow Well No. Pool Name, Including Formation 1 Boyd Morrow (Gas) Kind of Lease State, Federal or Fee State Lease No. E-10167
Location
Unit Letter A 990 Feet From The North Line and 990 Feet From The East
Line of Section 16 Township 19-S Range 25-E, NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate X Address (Give address to which approved copy of this form is to be sent)
Navajo Crude Oil Purchasing Company P.O. Box 159 Artesia, New Mexico 88210
Name of Authorized Transporter of Gasinegas Gas or Dry Gas X Address (Give address to which approved copy of this form is to be sent)
Natural Gas Pipeline Company P.O. Box 283 Houston, Texas 77001
If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rge. Is gas actually connected? When
A 16 19-S 25-E Yes July 3, 1975

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 Rest'v.	Diff. Rest'
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
SEP 28 1979								

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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.

J. B. Ticeplon
(Signature)

Vice President

September 24, 1979

(Title)

(Date)

OIL CONSERVATION COMMISSION

SEP 28 1979

APPROVED

BY

W. A. Gessert
SUPERVISOR, DISTRICT II

TITLE

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 O-104 must be filed for each pool in multiple