STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
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Form C-104
Revised 10-01-78
Format 06-01-83
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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator: Coastal Oil & Gas Corporation

Address: P.O. Box 235, Midland, Texas 79702

CASINGHEAD GAS MUST NOT BE FLARED AFTER 8/1/84 UNLESS AN EXCEPTION TO R-4070 IS OBTAINED.

Reason(s) for filing (Check proper box)

- [X] New Well
- [ ] Recompletion
- [ ] Change in Ownership

Change in Transporter of:

- [ ] Oil
- [ ] Dry Gas
- [ ] Casinghead Gas
- [ ] Condensate

Other (Please explain)

APPROVAL VALID FOR XX DAYS
PERMIT EXPIRES XX
UNLESS DRILLING UNDERWAY

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.
State "27"	3	Tulk (Penn)	State, Federal or Fee State	L-522

Location

Unit Letter A : 990 Feet From The North Line and 1300 Feet From The East

Line of Section 27 Township 14-S Range 32-E , NMPM. Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [X] or Condensate [ ]	Address (Give address to which approved copy of this form is to be sent)
Koch Oil of Texas, Inc.	P.O. Box 1558, Breckenridge, TX 76024
Name of Authorized Transporter of Casinghead Gas [X] or Dry Gas [ ]	Address (Give address to which approved copy of this form is to be sent)
Warren Petroleum Company	P.O. Box 1589, Tulsa, OK. 74102

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	A	27	14-S	32-E	no	

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

NOTE: *Complete Parts IV and V on reverse side if necessary.*

VI. CERTIFICATE OF COMPLIANCE

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

(Signature)

Sr. Petroleum Engineer
(Title)

June 12, 1984
(Date)

OIL CONSERVATION DIVISION

APPROVED JUN 14 1984, 19 ____

BY ORIGINAL SIGNED BY JERRY SEXTON

TITLE DISTRICT I SUPERVISOR

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.

V. COMPLETION DATA

Designate Type of Completion – (X)	Oil Well: X	Gas Well	New Well: X	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Spudded: 4-21-84	Date Compl. Ready to Prod.: 5-26-84		Total Depth: 10,000'			P.B.T.D.: 9932'		
Elevations (DF, RKB, RT, GR, etc.): 4312' KB	Name of Producing Formation: Penn		Top Oil/Gas Pay: 9786'			Tubing Depth: 9735'		
Perforations: 9786-90', 9797-9810', 9826-29', 9835-60'						Depth Casing Shoe: 10,000'		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2	13 3/8	400	440 sx Cl "C"
12 1/4	8 5/8	4,100	2100 sx Lite & 300 sx "C"
7 7/8	5 1/2	10,000	495 sx Cl "H"

VI. TEST DATA AND REQUEST FOR ALLOWABLE (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)

OIL WELL

Date First New Oil Run To Tanks: 6-10-84	Date of Test: 6-12-84	Producing Method (Flow, pump, gas lift, etc.): Hydraulic jet pump	
Length of Test: 24 hrs.	Tubing Pressure: -	Casing Pressure: 30	Choke Size: -
Actual Prod. During Test: 542	Oil - Bbls.: 363	Water - Bbls.: 179	Gas - MCF: 316

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

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JUL 18 1984
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