

# CORONADO EXPLORATION CORPORATION

1005 MARQUETTE N.W.

ALBUQUERQUE, NEW MEXICO 87102

TELEPHONE (505) 242-2050

DATE 4-1-81

TO NMOCB

SUBJECT Mesa Leon Unit #1

Box 2088

Santa Fe, New Mexico 87501

Dear Sir:

Enclosed please find a copy a letter dated March 24, 1981 from the New Mexico Commissioner of Public Lands requiring us to change the name of our well, the Martinez Federal #1 ( a federal lease) to the Mesa Leon Unit #1. I also enclose, as requested, the OCD form C104 making the above change.

APR 1 1981  
NEW MEXICO  
DIVISION  
SANTA FE

Sincerely,

SIGNED

*George...*

# State of New Mexico



ALEX J. ARMIJO  
COMMISSIONER



Commissioner of Public Lands  
March 24, 1981

P. O. BOX 1148  
SANTA FE, NEW MEXICO 87501

**RECEIVED**

**MAR 25 1981**

**Coronado Exploration Corp.**

Coronado Exploration Corporation  
1005 Marquette N.W.  
Albuquerque, New Mexico 87102

Re: Mesa Leon Unit  
Guadalupe County, New Mexico

ATTENTION: Mr. Harvey E. Yates, Jr.

Gentlemen:

The well records for the Mesa Leon Unit, filed with the New Mexico Oil Conservation Division, reflect that you have named your first exploratory well within the unit the "Martinez Federal". Since this is a unit well the name must be changed to "Mesa Leon Unit Well No. 1". This may be done by filing a name change on OCD Form C-104. Please file one copy with this office and the New Mexico Oil Conservation Division.

Please file a status report on the above mentioned well. The last Sundry Notice on this well is dated November, 1980.

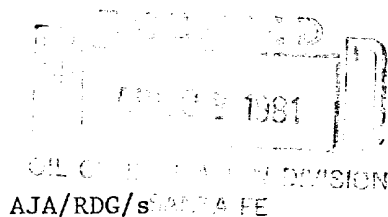
May we hear from you at your earliest convenience.

Very truly yours,

ALEX J. ARMIJO  
COMMISSIONER OF PUBLIC LANDS

BY: *Ray D. Graham*

RAY D. GRAHAM, Director  
Oil and Gas Division  
AC 505-827-2748



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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-1  
Effective 1-1-65

I.

Operator Coronado Exploration Corp.	
Address 1005 Marquette NW Albuquerque, New Mexico 87102	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change of name of well from the Martinez Federal #1 to the Mesa Leon Unit #1.
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name  
and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name Mesa Leon Unit (Martinez Fed.) #1	Well No. #1	Pool Name, Including Formation Wildcat, Pennsylvanian	Kind of Lease State, Federal or Fee Federal	Lease No. NM12141
Location Unit Letter <u>D</u> ; <u>660</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>West</u> Line of Section <u>22</u> Township <u>6N</u> Range <u>17E</u> , NMPM, <u>Guadalupe</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 type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Rge.
	Is gas actually connected? When	

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

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
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

V. 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)

Date First New Oil Run To Tanks	Date of Test APR 03 1981	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure OIL CONSERVATION DIVISION	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. SANTA FE	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.

Paul Gurnee  
(Signature)

Production Secretary

(Title)

April 1, 1981

(Date)

OIL CONSERVATION COMMISSION

APPROVED April 6, 19 81

BY Carl Ulvog

TITLE SENIOR PETROLEUM GEOLOGIST

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.