

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.

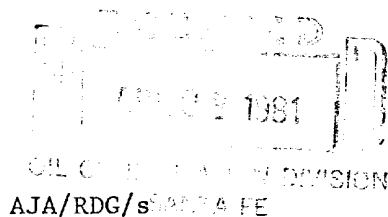
Very truly yours,

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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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 ☐ Change in Transporter of: Oil ☐ Dry Gas ☐ Change of name of well from the
Recompletion ☐ Casinghead Gas ☐ Condensate ☐ Martinez Federal #1 to the Mesa Leon Unit
Change in Ownership ☐ #1.

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.
Mesa Leon Unit (Martinez Fed.) #1		Wildcat, Pennsylvanian	State, Federal or Fee Federal	NM12141
Location				
Unit Letter	D	660	Feet From The North Line and	660 Feet From The West
Line of Section	22	Township	6N	Range 17E, NMPM, Guadalupe County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	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	Producing Method (Flow, pump, gas lift, etc.)	
	APR 03 1981		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	OIL CONSERVATION DIVISION		
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.