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U.S.G.S.		<u> </u>	<u> </u>
LAND OFFICE			1
TRANSHORTER	OIL	1	
	GAS	Γ_{-}	
OPERATOR			
PRORATION OFFICE			1
	FICE	1_	

	REQUEST FOR ALLOWABLE AND RECEIVE U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL OF APR 0 8 19		GAS			
	TRANSPORTER GAS	<u></u>	O. C. D	•		
ı.	PRORATION OFFICE	1	ARTESIA, OFF			
	Cibola Energy Corporation / (formerly Coronado Exploration Corporation.)					
	1005 Marquette 1	W Albuquerque, New Me	exico 87102			
	Reason(s) for filing (Check proper box New Well Recompletion Change in Ownership	Change in Transporter of: Oil Dry Go Casinghead Gas Conde	from Coronado Ex Cibola Energy Co	change name of operator ploration Corp. to orporation		
	If change of ownership give name and address of previous owner					
T1	DESCRIPTION OF WELL AND	LEASE				
J.P. White "D" Well No. Pool Name, Including Formation Racetrack SA				State, Federal or Fee Fee		
	Location Unit Letter C ; 60	60 Feet From The North Lir	ne and 1980 Feet From	The West		
	Line of Section 20 Tox	waship 10S Range	28E , NMPM, Chav	es Cou		
111.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	ıs			
	Name of Authorized Transporter of Oil Navajo Crude Oil Purch	or Condensate	Address (Give address to which appr	tesia, NM 88210		
	Name of Authorized Transporter of Cas	singhead Gas or Dry Gas	Address (Give address to which appr	oved copy of this form is to be sent)		
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. P.ge.	Is gas actually connected? W	hen		
	If this production is commingled wit	th that from any other lease or pool,	give commingling order number:			
IV.	Designate Type of Completic	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Re		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	Perforations			Depth Casing Shoe		
	Periordions					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
٧,	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil	and must be equal to or exceed top a		
٧.	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 able 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 Sixe		
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gos-MCF		
				1 1 1		
	GAS WELL	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
	Actual Prod. Test-MCF/D		Cosing Pressure (Shut-in)	Cheke Size		
	Testing Method (puot, back pr.)	Tubing Pressure (Shut-in)				
UL.	CERTIFICATE OF COMPLIANC	CE ·	OIL CONSERVATION COMMISSION JUL 1 5 1981			
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		Wall a Gressett				
	Production Secretary (Title) April 7, 1981		TITLE SUPERVISOR DISTRICT II			
			TITLE SUPERINGE, DISCRETE IT			
				wable for a newly drilled or deep		
			il tests taken on the well in acco	roance with NOCE		
			able on new and recompleted w	ust be filled out completely for al ells.		
			Fill out only Sections I. II. III. and VI for changes of ow well name or number, or transporter, or other such change of condi- Separate Forms C-104 must be filed for each pool in mul-			
			II - Tarani in the area in the contraction of the c			