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TRANSPORTER	OIL /
	GAS
OPERATOR	/
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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-110
Effective 1-1-65

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AUG 29 1980

I. Operator		Coronado Exploration Corp.		O. C. D.	
Address		1005 Marquette NW, Albuquerque, NM 87102			
Reason(s) for filing (Check proper box)		Other (Please explain)			
New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	CASHED AND NOT BE		
Recompletion	<input type="checkbox"/>	Oil	FILED AFTER 10-11-80		
Change in Ownership	<input type="checkbox"/>	Dry Gas	UNLESS AN EXCEPTION TO Rule 306		
		Casinghead Gas	IS OBTAINED		
		Condensate			

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	J.P. White D	Well No.	3	Pool Name, including Formation	Race Track SA	Kind of Lease	State, Federal or Fee	Fee	Lease No.
Location	Unit Letter L, 1980 Feet From The North Line and 600					EX # 2-516	EXPIRES	8-1-81	
						EX # 2-538	EXPIRES	11-8-81	
Line of Section	20	Township	10S	Range	28E	NMPM,	Chaves	County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Navajo Crude Oil Purchasing Co.		Address (Give address to which approved copy of this form is to be sent)		Box 159 Artesia, New Mexico 88210
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.	Pge.	Is gas actually connected? When
	E	20	10	28	

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 Res'v.	Diff. Res'v.
	X		X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
May 5, 1980	8/1/80	2287	N/A					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3703 Gr.	Slaughter SA	2275	2275					
Perforations	1A @ H 2275-2287		Depth Casing Shoe					
			2275					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
10"	8 5/8		310		200			
8	4 1/2		2275		175			

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.)	
8/11/80	8/31/80	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hr.			
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
14 bbls	14 bbls	0	

GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, 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.

Production Secretary

August 26 1980

OIL CONSERVATION COMMISSION

AUG 29 1980

APPROVED

BY

TITLE SUPERVISOR, DISTRICT II

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.