

JUN 13 1977

Form 15-1 (Rev. 11-66)

EL PASO NATURAL GAS COMPANY

**O. C. C.**  
**ARTEZIA, OFFICE**

DATE June 9 19 77

ADVICE ON WELLS TIED INTO GAS GATHERING SYSTEMS

Name of Producer Coquina Oil Corp. (1559)

Well Name and Number Bass-State #1

Location 1880'N, 660'W, Sec. 32, T-19-S, R-29-E, Eddy Co., NM

Pool Name North Burton

Producing Formation Penn

Top of Gas Pay 10258'

Oil or Gas Well Gas

Gas Unit Allocation 320 Acres

Date Tied Into Gathering Systems June 7, 1977

Date of First Delivery June 7, 1977

Gas Gathering System Carlsbad Gathering System

Processed through Gasoline Plant (yes or no) No

Station Number 61-795-01

Remarks: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

By: James L. Elliott, Dispatching

DISTRIBUTION		5
ANTA FE		/
ILE		/
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

RECEIVED

JUN 9 1977

I. Operator  
Coquina Oil Corporation ✓  
Address  
P. O. Drawer 2960, Midland, Texas 79702 O. C. C.  
Reason(s) for filing (Check proper box)  
New Well ☒ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐  
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.
Bass State	1	North Burton (Penn)	State, Federal or Fee State	K-6774
Location				
Unit Letter	E	1880 Feet From The North Line and 660 Feet From The West		
Line of Section	32	Township 19-S	Range 29-E	NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Summit Gas Company	405 Entex Bldg., Houston, Texas
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)
El Paso Natural Gas Pipe Line	P. O. Box 1492, El Paso, Texas 79978
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
E 32 19S 29E	Yes June 7, 1977

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.					
1-30-77	5-16-77	11,515'	10,550'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3280 Gr	Strawn & Atoka	10,258	11,515'					
Perforations	10,327-34; 10,298-70; 10,470-80; 10,455-58; 10,370-94		Depth Casing Shoe					
		11,515'						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17 1/2	13 3/8	358	700					
12 1/4	8 5/8	3,053	508					
7 7/8	7	3,351	350					
6 1/8	4 1/2	11,515	300					

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.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
2,820	24	174.84	59.1
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Back Pressure	FTP 2422	2675	Various

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.

C. Alan Bump  
(Signature)  
Engineering Assistant  
(Title)  
June 7, 1977  
(Date)

OIL CONSERVATION COMMISSION

JUN 10 1977

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY W. A. Gressett  
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 multiple