

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-105
Effective 1-1-65

RECEIVED RECEIVED

FEB 25 1976

FEB 18 1976

Operator:

COQUINA OIL CORPORATION ✓

O. C. C.

ARTESIA, OFFICE

O. C. C.

ARTESIA, OFFICE

Address:

P.O. DRAWER 2960 MIDLAND, TEXAS 79701

Person(s) for filing (Check proper box)

New Well

☐

Change in Transporter of:

Recompletion

☒

Oil

☐

Dry Gas

☐

Change in Ownership

☐

Casinghead Gas

☐

Condensate

☐

Other (Please explain)

CASINGHEAD GAS MUST NOT BE
FLAMED AT 5-12-76

UNLESS EXCEPTION TO RULE 306
IS OBTAINED see attached letter

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.
J.M. State	1	Und. Wolfcamp	State, Federal or Fee State	K-6503
Location				
Unit Letter	K	1980 Feet From The	South Line and	1980 Feet From The
				West
Line of Section	11	Township	21-S	Range
				27-E, NMPM, Eddy 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)
Miller Oil Purchasing Company		
Name of Authorized Transporter of Casinghead Gas	or Dry Gas	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company		P.O. Box 2419, Midland, Texas 79701
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	K	11
		21-S
		27-E
		yes
		8-16-74

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't.	Diff. Res't.
XX						XX		XX
Date Spud	Date Compl. Ready to Prod.	Total Depth	P.S.T.D.					
9-25-73	2-10-76	11,658	10,330					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3245 GR	Und. Wolfcamp	9167 9583	9555					
Perforations			Depth Casing Shoe					
See Attached								

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2	13 3/8	618	700
12 1/4	9 5/8	3035	1300
8 3/4	7 5/8	9860	500
----	2 7/8	9555	Packer

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.)	
None 2-10-76 2-10-76	2-12-76	Flowing	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24	25	Pkr	24/64
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
	18	55.8 35	55.8

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.

C. Alan Bump
(Signature)

Engineering Assistant

(Title)

February 17, 1976

(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 26 1976

BY W. A. Grossett
SUPERVISOR, DISTRICT II

TITLE

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 Form C-104 must be filed for each well in multiple.