

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
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-110  
Effective 1-1-65

RECEIVED

FEB 20 1975

I. Operator  
Coquina Oil Corporation  
Address  
200 Building of Southwest, Midland, Texas  
Reason(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)

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE  
Lease Name FAF Federal Well No. 1 Pool Name, Including Formation Wildcat Kind of Lease State, Federal or Fee Federal Lease No. NM0554477A  
Location  
Unit Letter I 2180 Feet From The S Line and 660 Feet From The E  
Line of Section 23 Township 22 S Range 25 E, NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil ☐ or Condensate ☒ Summit Gas Company Address (Give address to which approved copy of this form is to be sent) 405 Entex Building, Houston, Texas 77002  
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Negotiating 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 I Sec. 23 Twp. 22S Rge. 25E Is gas actually connected? No When Not Known at Present Time

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.  
Date Spudded 7-29-74 Date Compl. Ready to Prod. 2-3-75 Total Depth 11,470 P.B.T.D. 9,478  
Elevations (DF, RKB, RT, GR, etc.) G.L. 3440 Name of Producing Formation Cisco Canyon Top Oil/Gas Pay 9302  
Perforations 9382 - 9396' Depth Casing Shoe 9509  
TUBING, CASING, AND CEMENTING RECORD  
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT  
12 1/4" 8 5/8" 1751 1175  
7 7/8 4 1/2" 9509 400

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 185 Length of Test 4 Bbls. Condensate/MMCF 6 Gravity of Condensate 61  
Testing Method (pitot, back pr.) Back Pressure Tubing Pressure (shut-in) S.I. 2967 Casing Pressure (shut-in) Packer Choke Size 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

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19 \_\_\_\_\_

BY \_\_\_\_\_

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

Superintendent

(Title)

February 19, 1975

(Date)