

DISTRIBUTION	
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-11  
Effective 1-1-65

RECEIVED

JAN 10 1975

B. C. C.  
ARTESIA, OFFICE

I. Operator  
Coquina Oil Corporation  
Address  
200 Bldg. of Southwest, Midland, Texas 79701  
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 State 16	Well No. 1	Pool Name, Including Formation So. Carlsbad Morrow	Kind of Lease State, Federal or Fee State	Lease No. LG-1443
Location Unit Letter 0 660 Feet From The S Line and 1980 Feet From The E Line of Section 16 Township 23S Range 26E, 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) <del>400 Enclave Bldg., Houston, TX. 77002</del>					
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)					
N. A. - Negotiating						
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 16	Twp. 23S	Rge. 26E	Is gas actually connected? No	When N.A.

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 7-20-74	Date Compl. Ready to Prod. 10-12-74		Total Depth 12,000		P.S.T.D. 11,671			
Elevations (DF, RKB, RT, GR, etc.) G.L. 3352'	Name of Producing Formation Morrow		Top Oil/Gas Pay 11,070		Tubing Depth 11,089			
Perforations 11,070-11,092'					Depth Casing Shoe 11,712			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2	13 3/8		594		800			
12 3/4	8 5/8		2754		1350			
7 7/8	4 1/2		11,712		185			

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

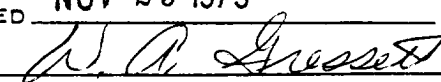
Actual Prod. Test-MCF/D 1956	Length of Test 1 Hr.	Bbls. Condensate/MMCF -0-	Gravity of Condensate -0-
Testing Method (pitot, back pr.) Back pressure	Tubing Pressure (Shut-in) 4021	Casing Pressure (Shut-in) Packer	Choke Size 10/64

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.

  
(J. T. Berry)  
Superintendent  
January 9, 1975

OIL CONSERVATION COMMISSION

APPROVED NOV 25 1975  
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 multiple