

DISTRIBUTION			
ANTA FE		1	
ILE		1	✓
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS	1	
OPERATOR		1	
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-111
Effective 1-1-65

RECEIVED

FEB 24 1981

Operator Coquina Oil Corporation ✓	
Address P.O. Drawer 2960, Midland, Texas 79702	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Nathan Federal Com.	Well No. 1	Location Undesignated Dublin Ranch Morrow	Kind of Lease Federal or Fee Federal	Lease No. NW-19842-A
Location Unit Letter J ; 2080 Feet From The East Line and 1980 Feet From The South				
Line of Section 28 Township 22S Range 28E N.M.P.M. Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
No Oil		
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
El Paso Natural Gas Company	P. O. Box 1492, El Paso, Texas 79928	
If well produces oil or liquids, give location of tanks.	Unit	Sec. Township Range
		Is this actually connected? When
		No Yes March 5, 1981

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.
		X	X					
Date Spudded 10/2/80	Date Compl. Ready to Prod. 1/14/81	Total Depth 12,700'	F.B.T.D. 12,614'					
Elevations (DF, RKB, RT, GR, etc.) 3063' GR	Name of Producing Formation Morrow	Top Oil/Gas Pay 11,986'	Tubing Depth 11,879' 2 7/8"					
Perforations 11984-990', 12006-012', 12042-050', 12055-060', 12066-078', 12,127'-142', 12,162-166', 12197-122-12', 12248-254'			Length Casing Shoe 12,700'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
26"	20"	351	350 sx Howco Lite					
17-1/2"	13-3/8"	2560'	1850 sx Lite & 300 sx C					
12-1/4"	9-5/8"	10,520'	1542 sx TLW, 300 sx CT					
	7 7/8" Liner	10084-11757' w/ 1305 x	C, 1780 sx Lite, 100 sx					

V. TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL

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 1922	Length of Test 1 hour	Bbls. Condensate/MCF None	Gravity of Condensate --
Testing Method (pitot, back pr.) Orifice Meter	Tubing Pressure (Shut-in) 3903 psi	Casing Pressure (Shut-in) 0	Choke Size 12/64

I. 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.

G. L. Crain
(Signature)

Operations Manager

(Title)

February 18, 1981

(Date)

OIL CONSERVATION COMMISSION

MAR 12 1981

APPROVED _____, 19

BY *W. A. Gressitt*

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 1111.

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 pool in multiple