BIATL OF HEW NEEDOD		VATION DIVISION	Form C-104 Revised 10-1-78		
BANTA FE	-1	, 110X 2088 NEW MEXICO 8 <b>7501</b>	<b>x</b>		
V 8.0.8.	REQUEST FOR ALLOWABLE		RECEIVED		
TAANSPURTER			DEC & 1982		
I. PRONATION OFFICE	1	ANSPORT OIL AND NATURAL GAS	0. С		
Petro Lewis Co.	rporation V		ARTESIA, OFFICE		
	bock, Texas 79490				
Reason(s) for filing (Check p		Other (Please explain)			
New Well Recompletion	Change in Transporter of: OII D	y Cos			
Change in Ownership	Casingheod Gas Co				
If change of ownership give	""" Coquina Oil Corporatio	on Drawer 2960 Midland, 1	Tevas 79702		
and address of previous ow	ner				
I. DESCRIPTION OF WELL					
Nymeyer	Well No. Pool Name, Includin 1 South Culebr	ng Formation Kind of Lea ca Bluff (Atoka) XHONAXXXXX			
Location			]		
Unit Letter F	: <u>1980</u> Feet From The West	Line and _23]()Feet From	The North		
Line of Section 15	Township 220 Range	28E , NMPM, Eddy	7 Courses		
	Township 235 Hange		County		
I. DESIGNATION OF TRAN	er of OIL OF OIL AND NATURAL	GAS   Address (Give address to which appr	aved capy of this form is to be cost		
The Permian Con		Box 1183 Houston, Texa	•		
Name of Autocrized Transport		Address (Give address to which appri	oved copy of this form is to be sent)		
El Paso Natural	Linti Sec Two Has	Box 1492 El Paso, Tex	kas 79928		
If well produces oil or liquids give location of tanks.	F 15 23S 28		0/12/81		
If this production is commin . COMPLETION DATA	gled with that from any other lease or po		Plug Back <sup>1</sup> Same Res'v. <sup>1</sup> Difl. Res'.		
Designete Type of Co		i New Well Workover Deepen	Plug Dock Same Hesivi, Dill, Hesivi,		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
Elevations (DF, RKB, RT, GR	, cic.j Mame of Producing Formation	Top Oll/Gas Pay	Tubing Depth		
Perforations	•		Depth Casing Shoe		
	TUBING, CASING, A CASING & TUBING SIZE	AND CEMENTING RECORD	SACKS CEMENT		
HOLE SIZE					
. TEST DATA AND REQU		e after recovery of total volume of load oil	and must be equal to or exceed top allow		
OIL WELL Date First New Oil Run To To:	· · · · · · · · · · · · · · · · · · ·	depth or be for full 24 hours) Producing Kiethod (Flow, pump, gas li	if1, etc.)		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
		Wale: - Bbls.	Gcs - MCF		
Actual Pred. During Test	Oli-Bbls.				
<u></u>	<u>, l</u>	· · · · · · · · · · · · · · · · · · ·	· • · · · · · · · · · · · · · · · · · ·		
GAS WELL Actual Fred. Tool-MCF/D	Length of Test	Bbls. Condensate AMCF	Gravity of Condenecte		
actual from the more more for					
Teeting Mether (pitor, back pr.	) Tubing Presewe (shut-in)	Casing Pressure (Shat-in)	Choke Size		
CERTIFICATE OF COMP	LIANCE	OIL CONSERVAT	FION DIVISION		
••		APPROVED DEC 9 1982	)		
Division have been complies	and regulations of the Oil Conservation d with and that the information given	Burney Burney			
sbove is interand complete	to the best of my knowledge and belief	Leslie A. Clemonts			
· ,A		TITLE _Supervisor Land at II			
///	K. I.	This form is to be filed in compliance with BULE 1100.			
- Wannell	(Signature)	well this form must be accompany	If this is a request for allowable for a newly drilled or deepense well, this form must be accompanied by a tabulation of the deviation		
Prod/Rev Superv		- All anctions of this form mu	tests taken on the well in accordance with RULE 111. All anctions of this form must be filled out completely for allow-		
	(Tule)	able on now and recompleted wells. Fill out only Sections I, II, III, and VI for changes of owner.			
11/2	(Dale)	well name or number, or transport	er, or other such change of condition.		
		II	the fills for each pool in multiply		

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ł		4			
	DISTRIBUTION		CONSERVATION COMMISSION	Form C -104	
	ANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11	
	i.S.G.S.		AND	Effective 1-1-65	
	LAND OFFICE	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAI	L GAS	
		-		RECEIVED	
	TRANSPORTER GAS /	-			
	OPERATOR /			JUL 27 1981	
1.	PRORATION OFFICE			•	
	Operator			O. C. D.	
	Coquina Oil Corpora	ation /		ARTESIA, OFFICE	
	Address				
		Midland, Texas 79702	·		
	Reason(s) for filing (Check proper box		Other (Please explain)		
	New Well X Recompletion	Change in Transporter of:			
	Change in Ownership				
		Casinghead Gas Conde	nsate		
	If change of ownership give name and address of previous owner	·			
п.	DESCRIPTION OF WELL AND	LEASE			
		Well No.         Fool Name, Including F           1         Undes.         N.	ormation Brack - Kind of Le		
	Nymeyer	I Ondes. N. Lo	The Morrow For State, Fed	eral cr Fee Fee	
			2210	March	
	Unit Letter F ; ; [98	BO Feet From The West Li	ne and Feet Fro	m The North	
•	Line of Section ]5 To	waship 23S Barge 2	28E NMEM.	Eddy	
l	Line of section 15 16	wnship 233 Bange 2	LOE , NMFM,	Eddy County	
Ш.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	NC CONTRACTOR		
1	Name of Authorized Transporter of Oil	or Condensate X	Address (Give address to which app	proved copy of this form is to be sent)	
	I The Permian Corporation		P. O. Box 1183, Hous		
	The Permian Corporation Name of Authorized Transporter of Cas	singhead Gas 📋 or Dry Gas 🗙	Address (Give address to which approved copy of this form is to be sent)		
	El Paso Natural Gas Con		P. O. Box 1492, E1 F	aso, Texas 79928	
	If well produces oil or liquids,	Unit Sec. Twp. Rae.		When 10-12-81	
	give location of tanks.	F 15 23S 28E	1 '	August 1, 1981	
1	If this production is commingled wi	th that from any other lease or pool,	······		
IV.	COMPLETION DATA	in that from any other rease of poor,	give comminging order number:		
	Designate Type of Completio	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
l		, v			
	Date Spudded	Date Compl. Ready to Fred.	Total Depth	P.B.T.D.	
1	4/5/81	7/21/81	12,820'	11,912	
	Elevations (DF, RKB, RT, GR, etc.) 3001' GR	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	Perforations	Atoka	11,594	11,619'	
	11,594-616'			Depth Casing Shoe	
⊦	11,334-010			11,942'	
ŀ	HOLE SIZE	CASING & TUBING SIZE	CEMENTING RECORD		
ŀ	26"	20"	301'	SACKS CEMENT	
ŀ	17-1/2"	13-3/8"	2488'	650 2100	
ŀ	12-1/2	9-5/8"	9912'		
ŀ	12-4	7-5/8" Liner	Top 9512' Bottom 1194	Two Stg: 1275 sx-1115 sx 2' 555	
v .	TEST DATA AND REQUEST E			il and must be equal to or exceed top allow-	
••	OIL WELL	able for this de	fter recovery of total volume of load o with or be for full 24 hours)	il and must be equal to or exceed top allow-	
ſ	Date First New Oil Run To Tanks	Date of Test	Freducing Method (Flow, pump, gas	lift, etc.)	
			-	O JUNT-PE	
Γ	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
				added 23	
ſ	Actual Prod. During Test	Oil-Bhls.	Water-Bbla.	Gas-MCF	
l		L	L		
	GAS WELL				
ļ	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
ļ.	13,850 CAOF	5	0		
	Testing Method (pitot, back pr.)	Tubing Pressure (Ehnt-in)	Casing Pressure (Shut-in)	Choke Size	
Ľ	Orifice Meter	Various	0	Various	
/ <b>I.</b> (	CERTIFICATE OF COMPLIANC	CE	OIL CONSERV	ATION COMMISSION	
			AFPROVED OCT 2 (	1981	
	I hereby certify that the rules and r Commission have been complied w		APPROVED ULI 2 U DOI 19		
	above is true and complete to the				
		•	SUPERVISOR	DISTRICT II	
			TITLE SUPERVISOR		
			This form is to be filed in	compliance with RULE 1104.	
-	Billy M. Priebe			owable for a newly drilled or deepened	
-		ture)		ordance with BULF 111.	
[	Drilling Manager		tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow-		
(Title)			pbie on new and recompleted wells.		
			sble on new and recompleted v	wells.	
-	July 23, 1981		Fill out only Sections I,	II. III, and VI for changes of owner,	
-			Fill out only Sections I, well name or number, or transpo		

Coqueina rymeyer \* 1- 15-23-28 3td B5 50. - 9100