	DISTRIBUTION ANTA FE		CONSERVATION C AISSION TOR ALLOWABLE AND	Form C-104 Supersedes Old C-104 and C Effective 1-1-65	
	LAND OFFICE	AUTHORIZATION TO T	RANSPORT OIL AND NATURA		
	FRANSPORTER OIL /			RECEIVED	
ı.	OPERATOR / PROPATION OFFICE			AUG 18 1978	
	Coquina Oil Corporation				
	Address		72	O. G. G. Antena, office	
	P. O. Drawer 2960, MIdland, Texas 7970  Reason(s) for filing (Check proper box)		JZ Other (Please explain)		
	New Well X	Change in Transporter of:		ALAG MELIAM NAME DEL	
	Recompletion Change in Ownership	Oil Cry Casinghead Gas Conc	FLARED AFTI	GAS MUST NOT BEI	
	If change of ownership give name	Land J	UNLESS AN I	EXCEPTION TO Fule 306	
21	and address of previous owner	p 5911  De LEASE Cotton Des	Dela sa	E, +2-270	
•••	Lease Name	Well No. Pool Name Actualing	Formation Kind of Le	ease Lease No.	
	El Paso Federal	1 <del>Und</del> Bela	State, Fed		
	Unit Letter K ; 79	Peet From The S	ine and 1980 Feet Fro	m The W	
	Line of Section 12 T	ownship 24-S Range	31-E , NMPM,	Eddy	
) <b>11</b> 1	DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL G	46	County	
	Name of Authorized Transporter of C	or Condensate	Address (Give address to which app	proved copy of this form is to be sent)	
	Basin, Inc.	astnahead Gas X or Dry Gas	P. O. Box 2297, Midlar	nd, TX. 79702	
	Name of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is to be sent)  None				
	If well produces oil or liquids,	Unit Sec. Twp. Ege.	, , , , , , , , , , , , , , , , , , , ,	When:	
	give location of tanks.	K 12 24-S 31-E			
ĭ <b>V</b> .	If this production is commingled w COMPLETION DATA	this production is commingled with that from any other lease or pool, give commingling order number:  OMPLETION DATA			
	Designate Type of Complet	ion = (X) Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Resty. Diff. Resty	
ł	Date Spudded	Date Compl. Ready to Prod.	X Total Depth	P.B.T.D.	
	5/25/78	7/16/78	4,690	4,653	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Cil, Gas Pay	Tubing Depth	
	KB 3,553'; GL 3,540'	Delaware	4,590	4,513  Depth Casing Shoe	
-	4,590-4,594			4,690	
-	TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET				
ł	12 1/4"	8 5/8"	376	SACKS CEMENT	
	7 5/8"	5 1/2"	4,690	275 sx. Cl. C 225 sx. Cl. C	
-		23/6"			
	EST DATA AND REQUEST FOR ALLOWABLE  (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours)				
Ī	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	life, etc.)	
_	8-7-78	8-7-78	Pump		
	Length of Test 24 hrs.	Tubing Pressure	Casing Pressure NA	Choke Size	
-	Actual Prod. During Test	Oil-Bbis.	Wate: - Bble.	Gas-MCF S	
		6.96	75	TSTM 5	
	GAS WELL				
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensqte/MMCF	Gravity of Condensate	
-	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
T CERTIFICATE OF COURT INTO					
I. CERTIFICATE OF COMPLIANCE				ATION COMMISSION	
		regulations of the Oil Conservation		4 1978	
С	Commission have been complied v	with and that the information given be best of my knowledge and belief.	BY W.a. Grossett		

Drilling Manager

August 15, 1978

(Title)

(Date)

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. Connecte Forms C-10d must be filed for each sool in multiply