

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

MAR 04 1981

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LAND OFFICE	
TRANSPORTER	<input checked="" type="checkbox"/>
OIL	<input checked="" type="checkbox"/>
GAS	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PROMOTION OFFICE	

I. Operator  
Coronado Exploration Corp. ✓

Address  
1005 Marquette NW Albuquerque, New Mexico 87102

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)  
**CASINGHEAD GAS MUST NOT BE  
 FLARED AFTER 5-1-81  
 UNLESS AN EXCEPTION TO Rule 306  
 IS OBTAINED**

If change of ownership give name and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name CX Plains	Well No. 1	Pool Name, Including Formation Racetrack SA	Kind of Lease State, Federal or Fee	Fee	Lease No.
Location Unit Letter <u>P</u> : <u>660</u> Feet From The <u>East</u> Line and <u>660</u> Feet From The <u>South</u> Line of Section <u>19</u> Township <u>10S</u> Range <u>28E</u> , NMPM, Chaves County					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Crude Oil	Address (Give address to which approved copy of this form is to be sent) N. Freeman Ave. Artesia, New Mexico
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)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	P 19 10S 28E

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 <input checked="" type="checkbox"/>	Gas well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Rest'v.	Diff. Re
Date Spudded 12-12-80	Date Compl. Ready to Prod. 2-25-81	Total Depth 2256'	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) 3752.2 Gr.	Name of Producing Formation San Andres	Top Oil/Gas Pay 2180	Tubing Depth 2244'					
Perforations Open Hole	Depth Casing Shoe 2240'							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
10"	8 5/8" - 20#	324'	150 Class "C" w/ 2%
8"	7" - 23#	2240'	50 sx Class "C" 25 sx Dowell Self-Stress

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 2-18-81	Date of Test 2-27-81	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24	Tubing Pressure N/A	Casing Pressure N/A	Choke Size N/A
Actual Prod. During Test 24 bbls.	Oil-Bbls. 24 bbls.	Water-Bbls. 0	Gas-MCF TSTM

Handwritten notes and signatures: "NCO", "2-27-81", "TSTM", "NCO", "2-27-81"

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (prior, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

*Neil Quinlan*  
(Signature)

Production Secretary

March 3, 1981

(Date)

OIL CONSERVATION DIVISION

APPROVED MAR 05 1981, 19

BY W. A. Gressett

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 deeper well, this form must be accompanied by a tabulation of the deviat tests taken on the well in accordance with RULE 111.  
 All sections of this form must be filled out completely for all able on new and recompleted wells.  
 Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of condit  
 Separate Forms C-104 must be filed for each pool in mult completed wells.