

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

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

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Coastal Oil & Gas Corporation	
Address P. O. Box 235, Midland, Texas 79702	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change in Transporter of: <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Condensate <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name State "4"	Well No. 3	Pool Name, including Formation Flying "M" (SA)	Kind of Lease State, Federal or Fee State	Lease No.
Location Unit Letter F : 1880 Feet From The North Line and 1980 Feet From The West Line of Section 4 Township 10-S Range 33-E , NMPM, Lea 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"/> Koch Oil of Texas, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1558, Breckenridge, Texas 76024					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1589, Tulsa, OK 74102					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 4	Twp. 10-S	Rge. 33-E	Is gas actually connected? no	When approx. May 1, 1984

If this production is commingled with that from any other lease or pool, give commingling order number: _____

NOTE: Complete Parts IV and V on reverse side if necessary.

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 is true and complete to the best of my knowledge and belief.

Donna Breeding
(Signature)
Production Analyst
(Title)
April 25, 1984
(Date)

OIL CONSERVATION DIVISION
APPROVED APR 27 1984, 19_____
BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR
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 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 multiply completed wells.

IV. COMPLETION DATA

Designate Type of Completion – (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth			
Perforations						Depth Casing Shoe			

OIL CONSERVATION DIVISION

P. O. BOX 2088

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WELL COMPLETION OR RECOMPLETION REPORT AND LOG

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OPERATOR	

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
30-025-28500	

1a. TYPE OF WELL		OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> OTHER <input type="checkbox"/>		7. Unit Agreement Name	
b. TYPE OF COMPLETION		NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> OTHER <input type="checkbox"/>		8. Farm or Lease Name	
2. Name of Operator		Coastal Oil & Gas Corporation		State "4"	
3. Address of Operator		P. O. Box 235, Midland, Texas 79702		9. Well No.	
4. Location of Well		UNIT LETTER <u>F</u> LOCATED <u>1880</u> FEET FROM THE <u>north</u> LINE AND <u>1980</u> FEET FROM THE <u>west</u> LINE OF SEC. <u>4</u> TWP. <u>10-S</u> RGE. <u>33-E</u> NMPM		10. Field and Pool, or Wildcat	
15. Date Spudded		16. Date T.D. Reached		17. Date Compl. (Ready to Prod.)	
12-26-83		1-15-84		3-17-84	
18. Elevations (DF, RKB, RT, GR, etc.)		19. Elev. Casinghead		12. County	
4257' GR				Lea	
20. Total Depth		21. Plug Back T.D.		22. If Multiple Compl., How Many	
4604'		4594'			
23. Intervals Drilled By		Rotary Tools		Cable Tools	
all					
24. Producing Interval(s), of this completion - Top, Bottom, Name		25. Was Directional Survey Made		26. Type Electric and Other Logs Run	
4522-4578' San Andres		yes		CDL/CNL/GR & DLL/MLL/GR & CBL/GR	
27. Was Well Cored		no		28. CASING RECORD (Report all strings set in well)	
CASING SIZE		WEIGHT LB./FT.		DEPTH SET	
8 5/8"		24#		1854'	
5 1/2"		20#		4600'	
HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED	
11"		1100 sx - circulated			
7 7/8"		1000 sx - circulated			
29. LINER RECORD		30. TUBING RECORD			
SIZE		TOP		BOTTOM	
SACKS CEMENT		SCREEN		SIZE	
				2 7/8"	
				4592'	
31. Perforation Record (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
4554-4578 (36 holes)		DEPTH INTERVAL		AMOUNT AND KIND MATERIAL USED	
4522-39		4554-4578		1500 gal 28% HCl + 3000 gal	
				15% HCl + 4500 gal 3% HCl	
		4522-39		5000 gal 20% NE-FE w/1500	
				SCF N ₂ /bbl.	
33. PRODUCTION		34. Disposition of Gas (Sold, used for fuel, vented, etc.)		Test Witnessed By	
Date First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)		C. D. Tate	
3-17-84		pumping - 2"x1 1/2"x22'			
Date of Test		Hours Tested		Choke Size	
3-18-84		24			
Flow Tubing Press.		Casing Pressure		Calculated 24-Hour Rate	
Oil - Bbl.		Gas - MCF		Water - Bbl.	
17		17		151	
Oil Gravity - API (Corr.)		17.1			
35. List of Attachments		36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.			
C-103, C-104, Logs, Deviation Survey					
SIGNED <u>Gary L. Blawie</u>		TITLE <u>Sr. Petroleum Engineer</u>		DATE <u>March 28, 1984</u>	

APR 20 1984
O.C.D.
MOBBS OFFICE
MOBBS OFFICE

INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, Items 30 through 34 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1105.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico

Northwestern New Mexico

T. Anhy _____	T. Canyon _____	T. Ojo Alamo _____	T. Penn. "B" _____
T. Salt _____	T. Strawn _____	T. Kirtland-Fruitland _____	T. Penn. "C" _____
B. Salt _____	T. Atoka _____	T. Pictured Cliffs _____	T. Penn. "D" _____
T. Yates 2543 (+1725)	T. Miss _____	T. Cliff House _____	T. Leadville _____
T. 7 Rivers 2657 (+1661)	T. Devonian _____	T. Menefee _____	T. Madison _____
T. Queen 3363 (+905)	T. Silurian _____	T. Point Lookout _____	T. Elbert _____
T. Grayburg _____	T. Montoya _____	T. Mancos _____	T. McCracken _____
T. San Andres 3804 (+464)	T. Simpson _____	T. Gallup _____	T. Ignacio Qtzte _____
T. Glorieta _____	T. McKee _____	Base Greenhorn _____	T. Granite _____
T. Paddock _____	T. Ellenburger _____	T. Dakota _____	T. _____
T. Blinbry _____	T. Gr. Wash _____	T. Morrison _____	T. _____
T. Tubb _____	T. Granite _____	T. Todilto _____	T. _____
T. Drinkard _____	T. Delaware Sand _____	T. Entrada _____	T. _____
T. Abo _____	T. Bone Springs _____	T. Wingate _____	T. _____
T. Wolfcamp _____	T. _____	T. Chinle _____	T. _____
T. Penn. _____	T. _____	T. Permian _____	T. _____
T. Cisco (Bough C) _____	T. _____	T. Penn. "A" _____	T. _____

OIL OR GAS SANDS OR ZONES

No. 1, from 4522 to 4578	No. 4, from _____ to _____
No. 2, from _____ to _____	No. 5, from _____ to _____
No. 3, from _____ to _____	No. 6, from _____ to _____

IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from _____ to _____	feet. _____
No. 2, from _____ to _____	feet. _____
No. 3, from _____ to _____	feet. _____
No. 4, from _____ to _____	feet. _____

FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
0	1902	1902	Sand, Shale, Limestone				
1902	1960	58	Anhydrite				
1960	2543	583	Salt, shale, anhydrite				
2543	2657	114	Sand, shale				
2657	3363	706	Salt, anhydrite, dolomite, shale				
3363	3804	441	Sand, shale, anhydrite, dolomite				
3804	4604	800	Dolomite, anhydrite, shale				

RECEIVED
APR 16 1986
D.C.B.
FIELD OFFICE

RECEIVED
APR 25 1984
P.C.D.
FEDERAL POLICE