

CONSERVATION DIVISION
P. O. BOX 2000
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF SPORE DEPOSITS	
DATE OF DEPOSIT	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	☐ OIL ☐ GAS
OPERATION	
PRODUCTION OFFICE	
OPERATOR	

Coastal Oil & Gas Corporation

P. O. Box 235, Midland, Texas 79702

Reason(s) for filing (Check proper box) & other	Other (Please explain)
New Well ☒	Change in Transporter of:
Recompletion ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☐	Casinghead Gas ☐ Condensate ☐
Request permission to move (sell) off lease to transporter, oil produced prior to Potential & Final Completion in the amount of 1200 bbls. ±.	
If change of ownership give name and address of previous owner _____	

DESCRIPTION OF WELL AND LEASE

Lease Name Federal "6"	Well No. 2	Pool Name, including Formation Baum (Upper Penn)	Kind of Lease State, Federal or Fee Federal	Lease No. NM 0558131
Location Unit Letter <u>J</u> : <u>1980</u> Feet From The <u>East</u> Line and <u>1980</u> Feet From The <u>South</u> Line of Section <u>6</u> Township <u>14-S</u> Range <u>33-E</u> . NMPM, Lea County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Tesoro Crude Oil Company	Address (Give address to which approved copy of this form is to be sent) 1515 First City East Bldg, Houston, Tx 77002
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Warren Petroleum Co. (not designated 2-23-83)	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 <u>J</u> Sec. <u>6</u> Twp. <u>14-S</u> Rge. <u>33-E</u>	Is gas actually connected? <u>No</u> When <u>Upon completion</u>

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

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 12-29-82	Date Compl. Ready to Prod. 2-19-83	Total Depth 10,054'	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) 4276.1 GR	Name of Producing Formation Upper Penn	Top Oil/Gas Pay	Tubing Depth					
Perforations			Depth Casing Shoe					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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

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.

David G. Campbell
(Signature)

Senior Petroleum Engineer

(Title)

2-23-83

(Date)

OIL CONSERVATION DIVISION

FEB 25 1983

APPROVED _____, 19 _____

BY ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPERVISOR

TITLE _____

This form is to be filed in compliance with RULE 1.22.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviated 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.

RECEIVED
FEB 24 1983
O.C.D.
HOBBS OFFICE

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