

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I. Operator Coastal Oil & Gas Corporation Well API No. 3002522464
Address P.O. Box 235, Midland, Texas 79702 ☐ Other (Please explain)
Reason(s) for Filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☒ Oil ☐ Dry Gas ☐
Change in Operator ☐ Casinghead Gas ☐ Condensate ☐
If change of operator give name and address of previous operator _____

II. DESCRIPTION OF WELL AND LEASE
Lease Name State "31" Well No. 1 Pool Name, Including Formation Baum (U. Penn) Kind of Lease State, Federal or Fee- Lease No. K-4807
Location Unit Letter L : 759 Feet From The West Line and 1881 Feet From The South Line
Section 31 Township 13-S Range 33-E, NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
Texas-New Mexico Pipeline Address (Give address to which approved copy of this form is to be sent)
P.O. Box 2528, Hobbs, New Mexico 88240
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐
Warren Petroleum Company 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 L Sec. 31 Twp. 13-S Rge. 33-E Is gas actually connected? Yes When? 7-20-70

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 3-9-68 Date Compl. Ready to Prod. _____ Total Depth 10,000' P.B.T.D. 9820'
Elevations (DF, RKB, RT, GR, etc.) 4284.8' Gr Name of Producing Formation Bough "B" Top Oil/Gas Pay 9782' Tubing Depth 9790'
Perforations 9782'-87' Depth Casing Shoe 10,000'
TUBING, CASING AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
17-1/2 13-3/8 368' 350
12-1/4 8-5/8 4082' 300
7-7/8 5-1/2 10,000' 200
2-3/8 9,790'

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 Tank _____ Date of Test 2-29-92 Producing Method (Flow, pump, gas lift, etc.) Flwg
Length of Test 24 hr Tubing Pressure 120 Casing Pressure 0 Choke Size 15/64
Actual Prod. During Test _____ Oil - Bbls. 167 Water - Bbls. 12 Gas - MCF Unknown

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

VI. OPERATOR 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.
Bobby L. Smith
Signature Bobby L. Smith Sr. Petroleum Engineer
Printed Name March 3, 1992 (915) 682-7925
Date Telephone No.

OIL CONSERVATION DIVISION
MAR 05 '92
Date Approved _____
By Paul Kautz Orig. Signed by
Geologist
Title _____

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104
1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
2) All sections of this form must be filled out for allowable on new and recompleted wells.
3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
4) Separate Form C-104 must be filed for each pool in multiply completed wells.