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TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISS.  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator Coastal States Gas Producing Company	
Address P. O. Box 235, Midland, Texas 79701	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name  
and address of previous owner

Lease Name Federal "20"		Well No. 4	Pool Name, Including Formation North Baum-Upper Pennsylvanian Indesignated Penn R-3789	Kind of Lease State, Federal or Fee Federal	Lease No. NM-2842-A
Location					
Unit Letter G ; 2080 Feet From The north Line and 2080 Feet From The east					
Line of Section 20 Township 13S Range 33E , NMPM, Lea County					

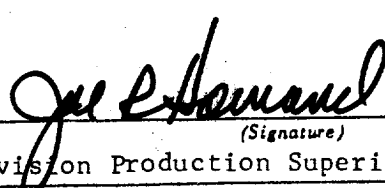
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas-New Mexico Pipe Line Company		Address (Give address to which approved copy of this form is to be sent) 221 N. Colorado, Midland, Texas 79701				
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> None		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 P	Sec. 20	Twp. 13S	Rge. 33E	Is gas actually connected? No	When - - -

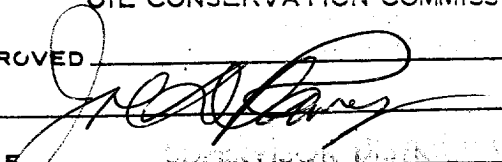
If this production is commingled with that from any other lease or pool, give commingling order number: NA

Designate Type of Completion -- (X)		Oil Well X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 12-28-68	Date Compl. Ready to Prod. 1-26-69	Total Depth 9852'		P.B.T.D. 9852'					
Elevations (DF, RKB, RT, GR, etc.) 4259.5' GL	Name of Producing Formation Penn	Top Oil/Gas Pay 9713'		Tubing Depth 9630'					
Perforations 9713'-15' and 9721-32'		Depth Casing Shoe 9852'							
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
17-1/2"	13-3/8"		375'		400 sxs Class "H"				
11 "	8-5/8"		4075'		300 sxs Class "C"				
7-7/8"	5-1/2"		9854'		200 sxs Class "C"				
5-1/2"	2-3/8"		9630'						

Date First New Oil Run To Tanks 1-26-69		Date of Test 1-26-69		Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hours	Tubing Pressure 420		Casing Pressure - - -		Choke Size 24/64"
Actual Prod. During Test 385	Oil-Bbls. 335		Water-Bbls. 50		Gas-MCF 245

Actual Prod. Test-MCF/D - - -	Length of Test - - -	Bbls. Condensate/MMCF - - -	Gravity of Condensate - - -
Testing Method (pitot, 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 Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.	
	
Division Production Superintendent	
(Title)	
January 27, 1969	
(Date)	

OIL CONSERVATION COMMISSION	
APPROVED	19
BY	
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.	