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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
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 Coquina Oil Corporation	
Address 418 Bldg. of the Southwest, Midland, Texas 79701	
Reason(s) for filing (Check proper box)	Other (Please explain)
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"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Vivian	Well No. 3	Pool Name, Including Formation Drinkard	Kind of Lease State, Federal or Fee	Fee	Lease No. --
Location					
Unit Letter <u>N</u> ; <u>660</u> Feet From The <u>S</u> Line and <u>1980</u> Feet From The <u>W</u>					
Line of Section <u>30</u> Township <u>22 S</u> Range <u>38E</u> , NMPM. <u>Lea</u> 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"/>	Address (Give address to which approved copy of this form is to be sent)					
Admiral Crude Oil Corporation	Box 1713, Midland, Texas					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Warren Petroleum	Box 1589, Tulsa, Oklahoma 74102					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	F	30	22S	38E	yes	January 27, 1972

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 <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded December 22, 1971	Date Compl. Ready to Prod. 2-1-72		Total Depth 7387		P.B.T.D. 7027			
Elevations (DF, RKB, RT, GR, etc., GL 3329, KB 3338	Name of Producing Formation Drinkard		Top Oil/Gas Pay 6280		Tubing Depth 6414			
Perforations					Depth Casing Shoe 7116			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2	15"	30'	2 cu. yds.
11	8 5/8"	1160	410
7 7/8	4 1/2"	7116	400
4 1/2	2 3/8	6414	--

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 2-1-72	Date of Test 2-4-72	Producing Method (Flow, pump, gas lift, etc.) flow	
Length of Test 24	Tubing Pressure 1220	Casing Pressure 1340	Choke Size 16/64
Actual Prod. During Test 162	Oil - Bbls. 162	Water - Bbls. 0	Gas - MCF 611

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, 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.

J. B. Taylor
(Signature) J. B. Taylor
Superintendent
(Title)
February 4, 1972
(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 7 1972, 19
BY J. B. Taylor
TITLE SUPERVISOR DISTRICT I

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.

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FEB 7 1972

OIL CONSERVATION COMM.
HOBBES, N. M.