5-OCC. AZTEC. N.M.				
DISTRIBUTION				
SANTA FE		/		
FILE		1	V	
U.S.G.S.				
LAND OFFICE				
IRANSPORTER	OIL			
	GAS	1		
OPERATOR		4		
PRORATION OFFICE				

	SANTA FE /	NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE		Form C-104 Supersedes Old C-104 and C-11 Effective 1-1-65			
	FILE / V		AND				
	U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	GAS			
	LAND OFFICE	4					
	TRANSPORTER GAS /	-					
	OPERATOR 7						
	PROPATION OFFICE	-					
1.	Operator	<u> </u>					
	Bolin Oil Company						
	Address						
	P. 0. Box 400, Aztec, New Mexico 87410						
	Reason(s) for filing (Check proper box))	Other (Please explain)				
	New Wat.	Change in Transporter of:					
	Recomp. * . a	Oil Dry Go	s 🔚				
	Change in Ownership	Casinghead Gas Conde	nsate				
	If change of ownership give name						
	and address of previous owner						
	DESCRIPTION OF WELL AND	LEASE					
11.	DESCRIPTION OF WELL AND Lease Name	Well No. Pool Name, Including F	ormation Kind of Leas	Lease No.			
	Candado	15 Otero Chacra	State, Federa	al or Fee Fed. 079107			
	Location						
	Unit Letter D ; 64	O Feet From The N Lir	ne and 630 Feet From	The			
	Line of Section 25 Tov	wnship 26N Range 7	W , NMPM, Rio Arr	iba County			
III.	DESIGNATION OF TRANSPORT	or Condensate	Address (Give address to which appro	oved copy of this form is to be sent)			
	Name of Authorized Transporter of Oil	of Condensate	Address (Other dedices to which apple	your copy of this form is to be come,			
	Name of Authorized Transporter of Cas	singhead Gas or Dry Gas XXX	Address (Give address to which appro	oved copy of this form is to be sent)			
	El Paso Natural Ga		P. O. Box 990, Farming				
		Unit Sec. Twp. Rge.		nen			
	If well produces oil or liquids, give location of tanks.	1 1 1	No				
			· 				
	If this production is commingled wit COMPLETION DATA	th that from any other lease or pool,	give commingling order number:				
3 V .		Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.			
	Designate Type of Completic	$\operatorname{pn} = (X)$	X				
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	12/3/75	1/2/76	3750'	37021			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
	6547' GL	Chacra	35581	35661 Depth Casing Shoe			
	Perforations 3558! - 3665!			3732'			
	JJJ0: - J00J:	TIRING CASING AND	D CEMENTING RECORD	717			
		CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
	HOLE SIZE	CASING & FORING SIZE	32,111321				
	7 7/8"	51:11	37321	485 axa			
	7 77 0		713-				
	51 /1	1211	3566'				
v	THET DATA AND DECLIFET FOR ALLOWARIE. (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow						
٠,	able for this depth or be for full 24 hours)						
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l				
			Casing Pressure	Chok Size			
	Length of Test	Tubing Pressure	Coaing Pressure	OIL COM COM.			
		Oil-Bbls.	Water - Bbls.	Gas-MOE DIST. 3			
	Actual Prod. During Test	Oli-Bbis.	114.0. 25.0.				
۲	CAC WELL						
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
	623 AOF	3 hrs.					
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size			
	Back Pressure	1041#		3/4"			
3 72	CERTIFICATE OF COMPLIANCE	<u> </u>	OIL CONSERV	ATION COMMISSION			
¥1.	CERTIFICATE OF COMPLIANCE		i l				
	hereby certify that the rules and regulations of the Oil Conservation		APPROVED, 19				
	Commission have been complied V	eby certify that the rules and regulations of the Off Conservation nission have been complied with and that the information given is true and complete to the best of my knowledge and belief.					
	above is true and complete to the	best of my knowledge and belief.	and belief. BY				
			TITLE				
	\sim 0 0		1	compliance with RULE 1104.			
	J. J. C. Signature)		n n n n n n n n n n n n n n n n n n n	mable for a newly drilled or deepened			
	(Sign	ature)	I at this form must be accomp	evied by a fabilition of the desterior			
	7. Cor		tests taken on the well in acco	ordance with RULE 111.			

agent, Bolin Oil (Title) 9/15/76

(Date) *** Notarized deviation survey filed w/ NMOCC. 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.