

✓ 5-000, Aztec, N.M.

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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

I. Operator
Bolin Oil Company

Address
P. O. Box 400, Aztec, New Mexico 87410

Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Candado	Well No. 16	Pool Name, Including Formation Otero Chacra	Kind of Lease State, Federal or Fee Fed.	Lease No. 079107
Location Unit Letter A ; 945' Feet From The N Line and 790' Feet From The E Line of Section 25 Township 26N Range 7W , NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Co.	P. O. Box 990, Farmington, N. Mex. 87401					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
					No	

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded 1/13/76	Date Compl. Ready to Prod. 10/27/76	Total Depth 5152'	P.B.T.D. 5142'					
Elevations (DF, RKB, RT, GR, etc.) 6457' GL	Name of Producing Formation Chacra	Top Oil/Gas Pay 3480'	Tubing Depth 3582'					
Perforations 3480' - 3588'	Depth Casing Shoe 5142'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4"	8 5/8" csg	170'	90 sxs					
7 7/8"	5 1/2" csg	5142'	665 sxs					
	1 1/4" tbg	3582						

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	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 445 AOF	Length of Test 3 hrs.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) Back pressure	Tubing Pressure (Shut-in) 948#	Casing Pressure (Shut-in) 951#	Choke Size 3/4"

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.

M. J. Crum Jr.
(Signature)
agent, Bolin Oil Co
(Title)
11/1/76
(Date)

OIL CONSERVATION COMMISSION

APPROVED JAN 1 1977, 19
BY Original Signed by A. R. Kendrick
TITLE SUPERVISOR DEPT. 3

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.

*** Notarized deviation survey on file w/