

WILLIAM R. SPEER  
CONSULTING GEOLOGIST  
Petroleum Club Plaza Bldg.  
Farmington, New Mexico 87401

P.O. BOX 255      PHONE 505-325-7789  
Certified Professional Geologist # 1121  
Petroleum and Mineral Evaluation and Management

July 3, 1982

N.M. Oil Conservation Div.  
Att'n. Mr. Frank Chavez  
1000 Rio Bravo Road  
Aztec, N.M. 87410

Re: Bolack Minerals Co. #4-R Bolack "E"  
Hole Deviation Tests

Dear Mr. Chavez,

The following hole deviation surveys were made while drilling the Bolack Minerals Co. #4-R Bolack "E" Pictured Cliffs well in the NE $\frac{1}{4}$  SE $\frac{1}{4}$  Sec. 1, T23N-R6W, NMPM, Rio Arriba Co., N.M.:

<u>DEPTH</u>	<u>DEVIATION</u>
$\frac{1}{4}$ °	100'
$\frac{1}{4}$ °	550'
$\frac{1}{2}$ °	1150'
1 $\frac{1}{4}$ °	1665'
1 $\frac{1}{2}$ °	1865'
1 $\frac{1}{2}$ °	2250'

RECEIVED  
JUL 18 1984  
OIL CON. DIV.  
DIST. 3

Very truly yours,

*Wm R. Speer*

William R. Speer, Agent for  
BOLACK MINERALS COMPANY

Subscribed and sworn to this 3rd day of July, 1984, by Wm. R. Speer.

*Quida Ninton*

My commission expires 9/24/86

OIL CONSERVATION DIVISION

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

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator M & M Production & Operation Inc.	Well API No. 3003923435
Address P.O. Box 175 Counselor, New Mexico 87018	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator Bolack Minerals Co. P.O. Box 268 Farmington, New Mexico 87499-268	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Bolack E	Well No. <input checked="" type="checkbox"/> 4 R	Pool Name, including Formation Ballard Pictured Cliffs	Kind of Lease State, Federal or Fee	Lease No. NM 06712 A
Location Unit Letter I : 2040 Feet From The South Line and 810 Feet From The East Line Section 1 Township 23 N Range 6 W , NMPM, Rio Arriba N.M. 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 checked="" type="checkbox"/> or Dry Gas <input 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 New Mexico					
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 1	Twp. 23N	Rge. 6W	Is gas actually connected? Yes	When ?

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
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

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 for full 24 hours.)

Date First New Oil Run To Tank	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	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.

Roger N. Mc Cown  
Signature  
Roger N. Mc Cown President  
Printed Name  
5-19-93 (505) 568-4416  
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved MAY 19 1993

By [Signature]  
Title SUPERVISOR DISTRICT #3

INSTRUCTIONS: This form is to be filed in compliance with Rule 110-

- 1) Request for allowable for newly drilled or deepened well must be accompanied with Rule 111.
- 2) All sections of this form must be filled out for allowable on new an
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well,
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

other such change