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TRANSPORTER	OIL 1 GAS 1
OPERATOR	2
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

I. OPERATOR

Operator **El Paso Natural Gas Company**

Address **Box 990, Farmington, New Mexico**

Reason(s) for filing (Check proper box) Other (Please explain)

New Well Change in Transporter of: **Change of Operator & Name change from Hardie A #1**

Recompletion Oil Dry Gas

Change in Ownership Casinghead Gas Condensate

If change of ownership give name and address of previous owner Al. H. Bolin

II. DESCRIPTION OF WELL AND LEASE

Lease Name Bolin A	Well No. 1	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State, Fed, <input checked="" type="checkbox"/> Local or Fee	Lease No. SF 078049-A
Location				
Unit Letter M	990	Feet From The South	Line and 990	Feet From The West
Line of Section 34	Township 29N	Range 6W	, NMPM, San Juan County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
El Paso Natural Gas Company	Box 990, Farmington, New Mexico			
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 Company	Box 990, Farmington, New Mexico			
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 34	Twp. 29N	Rgs. 6W
	Is gas actually connected?		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.
		X						
Date Spudded 12-27-52	Date Compl. Ready to Prod.	Total Depth 5224'		P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.) 6282' GL	Name of Producing Formation Mesa Verde	Top 3200 /Gas Pay 4400'		Tubing Depth 4981'				
Perforations Shot open hole (4400-5224') w/2085 Quarts Nitro				Depth Casing Shoe 4335'				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
No	10 3/4"		118'		150 Sks.			
Record	7"		4335'		300 Sks.			
	2" EUE		4981'		Tubing			

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 4545	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.

Original Signed **F. H. WOOD**
(Signature)
Petroleum Engineer
(Title)
July 6, 1967
(Date)

OIL CONSERVATION COMMISSION
JUL 10 1967

APPROVED _____, 19____
BY **Original Signed by Emery C. Arnold**
SUPERVISOR DIST. #3

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.