

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES DESIRED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
REGISTRATION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Fina Oil And Chemical Company
Address
1625 Broadway, Suite 1600 Denver, Colorado 80202
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)
Operator Name Change

If change of ownership give name and address of previous owner American Petrofina Company of Texas, 1625 Broadway, Suite 1600 Denver, Colorado 80202

II. DESCRIPTION OF WELL AND LEASE

Lease Name Bolack Federal	Well No. 2	Pool Name, including Formation Ballard Pictured Cliffs	Kind of Lease State, Federal or Fee. Federal	Lease No. 82-080375B
Location Unit Letter <u>I</u> : <u>1700</u> Feet From The <u>South</u> Line and <u>1190</u> Feet From The <u>East</u> Line of Section <u>6</u> Township <u>25N</u> Range <u>7W</u> N.M.P.L. San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

6523 GL

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 Company	P. O. Box 1492, El Paso, Texas 79978
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When

If this production is commingled with that from any other lease or pool, give commingling order number:

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

[Signature]
(Signature)
Administrative Manager
(Title)
July 23, 1985
(Date)

OIL CONSERVATION DIVISION

AUG 08 1985

APPROVED [Signature]
BY [Signature]
TITLE SUPERVISOR DISTRICT # 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.

RECEIVED
OIL CON. DIV.
DIST. 3