

5-000, Aztec, N.M.

NO. OF COPIES RECEIVED		5
DISTRIBUTION		
SANITARY		1
FILE		1
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	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-105
Effective 1-1-55

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. 17	Pool Name, Including Formation Otero Chacra (dual)	Kind of Lease State, Federal or Fee Fed.	Lease No. SFO79161
Location Unit Letter A 885 Feet From The N Line and 790' Feet From The E Line of Section 10 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 Company	P. O. Box 990, Farmington, New Mexico 87401
If well produces oil or liquids, give location of tanks.	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 12/5/76	Date Compl. Ready to Prod. 2/28/77	Total Depth 5305' KB		P.B.T.D. 5285' KB				
Elevations (DF, RKB, RT, GR, etc.) 6624' GL	Name of Producing Formation Chacra	Top Oil/Gas Pay 3714'		Tubing Depth 3771' KB				
Perforations 3714' - 3808'			Depth Casing Shoe 5305'					
CH TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 12 1/4"	CASING & TUBING SIZE 8 5/8"		DEPTH SET 284' KB		SACKS CEMENT 275 sxs/surface.			
	5 1/2"		5305' KB		840 sxs/two stg. tool			
	1 1/4"		3771' KB		@ 3888'.			

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 804 AOF	Length of Test 3 hrs.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) Back pressure	Tubing Pressure (Shut-in) 915#	Casing Pressure (Shut-in) 915#	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.

agent, Bolin Oil Company

(Signature)

(Title)

(Date)

*** Notarized Dev. survey on file NMOCC

OIL CONSERVATION COMMISSION

APPROVED **MAR 16 1977**, 19
Original Signed by **A. S. Kendrick**

BY
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 multiple