

5-000, Aztec, N.M.

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

WV 20-000-21738

I.

DISTRIBUTION	
ANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL <input checked="" type="checkbox"/> GAS <input checked="" type="checkbox"/>
OPERATOR	
PRORATION OFFICE	

Operator Bolin Oil Company	
Address P. O. Box 400, Aztec, New Mexico 87410	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Other (Please explain)
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Candado	Well Name 22-A Otero Chacra	Kind of Lease State, Federal or Free Fed.	Lease No. SF 079161
Location			
Unit Letter D	1190	N	790
Line of Section 4			
Township 26N			
Range 7W			
County Rio Arriba			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil N/A	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Gas El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 990, Farmington, N. Mex. 87401
If well produces oil or liquids, give location of tanks.	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)	X	X				
Date Spudded 11/2/78	Date Completed 3/28/79	Total Depth 5325' KB	Perforations 3744' - 3832'	Depth Casing Shoe		
Elevations (DF, RKB, RT, GK, etc.) 6651' GL	Name of Promoter Chacra	Total Gas Pay 3744'	TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE 12 1/4"	CASING & TUBING SIZE 8 5/8"	DEPTH SET 297' KB	SACKS CEMENT 250 sxs to surface.			
7 7/8"	5 1/2"	5317' KB	800 sxs to surface.			
	1 1/4"	3795' KB				

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 2,385 AOF	Length of Test 3 hrs.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) Back pressure	Tubing Pressure (Shut-in) 1001#	Casing Pressure (Shut-in) 1001#	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.

*** Notarized Deviation Survey on file w/OCC

J. T. Crum Jr.
(Signature)
agent, BOLIN OIL CO.
(Title)
8/11/79
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____

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 Form C-104 must be filed for each pool in multiple