NO. OF CUPIES RECE	IVED	1	
DISTRIBUTIO) N		
SANTA FE			
FILE			
U.S.G.S.		İ .	
LAND OFFICE			
IRANSPORTER	OIL	I	
	GAS	L_	
OPERATOR			
		7	

ļ	DISTRIBUTION	NEW MEXICO OIL CO	NSERVATION COMMISSION	Form C-104		
	SANTA FE		OR ALLOWABLE Supersedes Old C-104 and C- Effective 1-1-65			
- 1	FILE		AND			
Į	U.S.G.S.	AUTHORIZATION TO TRAN	ISPORT OIL AND NATURAL GA	NS		
	LAND OFFICE					
	I RANSPORTER GAS					
}	OPERATOR					
1.	PRORATION OFFICE					
	Tom Bolack		,			
	P.O. Box 255, Farmi	ngton, NM 87401				
	Reason(s) for filing (Check proper box)	119 6011 111 02 101	Other (Please explain)			
	New Well	Change in Transporter of:				
	Recompletion	Oil Dry Gas				
	Change in Ownership	Casinghead Gas Condens	ate			
	If change of ownership give name					
	and address of previous owner					
II.	DESCRIPTION OF WELL AND L	EASE Well No. Pool Name, Including For	mation Kind of Lease	Lease No.		
	Tommy Bolack	1 Basin Dk-	C C. desert	Federal NM02707		
	Location	1000111	•			
	Unit Letter M : 790	Feet From The South Line	and 790 Feet From Ti	ne West		
		nship 30 North Range 12	West , NMPM, San	luan County		
	Line of Section Town	nship 30 NOT [] Hange 12	west mest	<u> </u>		
III.	DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil	ER OF OIL AND NATURAL GAS or Condensate	Address (Give address to which approve	ed copy of this form is to be sent)		
	Permian Corp.	nghead Gas or Dry Gas X	Address (Give address to which approve	ed copy of this form is to be sent)		
	Name of Authorized Transporter of Cast		P.O. Box 990, Farmi			
	El Paso Natural Gas	Unit Sec. Twp. P.ge.	Is gas actually connected? When			
	If well produces oil or liquids, give location of tanks.	M 1 30N 12W	No !	Estim. May, 1981		
IV.	If this production is commingled with COMPLETION DATA	n that from any other lease or pool, g		Plug Back Same Res'v. Diff. Res'v.		
	Designate Type of Completion - (X) Oil Well Gas Well New Well Workover Deepen Plug Back Same Res					
		Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Date Spudded		6851	6806'		
	Jan. 6, 1981 Elevations (DF, RKB, RT, GR, etc.)	Mar. 14, 1981 Name of Producing Formation	Top Oil/Gas Pay	2 ^{Tubing} Pepth @ 6504'		
	5736Gr. 5750 KB.	Dakota & Gallup	6545' & 5930'	1 1/1 @ 5914' Depth Casing Shoe		
	Perforations			1		
	DK; 6545-50, 6600-2	DK; 6545-50, 6600-26, 44-60, 70-74, 6714-38'; GL: 5930-44' 6806'				
		TUBING, CASING, AND		SACKS CEMENT		
	HOLE SIZE	CASING & TUBING SIZE	263 ft.	275 sx.		
	13 3/4"	9 5/8" 5 1/2"	6851 ft.	925 (3 stages)		
	7 7/8"	5 1/2	0831 16.			
				THE STATE OF THE S		
2,	TEST DATA AND REQUEST FO	DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal top allowable for this depth or be for full 24 hours)				
٧.	OIL WELL	able for this de	pth or be for full 24 hours) Producing Method (Flow, pump, gas lif	The Said Said Said Said Said Said Said Said		
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas 11)	ABR 7 1981		
		Tubing Pressure	Casing Pressure	Choke Size		
	Length of Test	Tubing Freeze		OIL CART 3		
	Actual Prod. During Test	Oii-Bbls.	Water - Bbls.	Gae-MCF//ST-		
			CIRC 641 noi 50	T 7 nci EDC_250 nci		
	SIPC 641 psi, FPT-7 psi, FPC-					
GAS WELLGallup Fm. Flow est. 210 MCFPD on 3 hr. test. 3/4" ck. SI Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of				Gravity of Condensate		
	Testing Method (pitot, back pr.)	3 hr. Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
	Back Pressure	2127 psi	N/A	3/4"		
W/W	CERTIFICATE OF COMPLIANCE		OIL CONSERVA	TION COMMISSION		
¥1.	CERTIFICATE OF COM 2012		MAY 14 1981 19			
	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. (Signature) Agent (Title) April 6, 1981		Original Signed by FRANK T. CHAVEZ			
			BY			
			TITLE SUPERVISOR DISTRIC	1 #, 3		
			This form is to be filed in	compliance with RULE 1104.		
			I see a newly drilled or deepened			
			well, this form must be accompanied by a tabulation of the			
			All sections of this form mu	st be filled out completely for allow-		
			shie on new and recompleted watte.			
			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			

(Date)

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.