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TRANSPORTER	OIL	
	GAS	
OPERATOR		
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 Tom Bolack	
Address P.O. Box 255, Farmington, NM 87401	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Tommy Bolack	Well No. 1	Pool Name, including Formation Basin FloraVista Gallup	Kind of Lease State, Federal or Fee Federal	Lease No. NM02707
Location Unit Letter <u>M</u> : <u>790</u> Feet From The <u>South</u> Line and <u>790</u> Feet From The <u>West</u> Line of Section <u>1</u> Township <u>30 North</u> Range <u>12 West</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Permian Corp.	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"/> El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 990, Farmington, NM 87401					
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 1	Twp. 30N	Rge. 12W	Is gas actually connected? No	When Estim. May, 1981

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 Jan. 6, 1981	Date Compl. Ready to Prod. Mar. 14, 1981	Total Depth 6851'	P.B.T.D. 6806'					
Elevations (DF, RKB, RT, GR, etc.) 5736Gr. 5750 KB.	Name of Producing Formation Dakota & Gallup	Top Oil/Gas Pay 6545' & 5930'	Tubing Depth 2 1/16 @ 6504' 1 1/4 @ 5914'					
Perforations DK; 6545-50, 5600-26, 44-60, 70-74, 6714-38'; GL: 5930-44'			Depth Casing Shoe 6806'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 13 3/4"	CASING & TUBING SIZE 9 5/8"	DEPTH SET 263 ft.	SACKS CEMENT 275 sx.					
7 7/8"	5 1/2"	6851 ft.	925 (3 stages)					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and gas to be allowed to be tested 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
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.

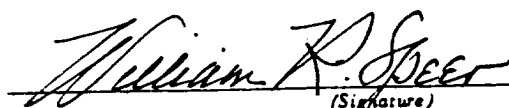
SIPC 641 psi, FPT-7 psi, FPC-250 psi

GAS WELL Gallup Fm. Flow est. 210 MCFPD on 3 hr. test, 3/4" ck. SIPT 642 psi,

Actual Prod. Test-MCF/D 1249 (CAOF) Dak.	Length of Test 3 hr.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (shut-in) 2127 psi	Casing Pressure (shut-in) N/A	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

(Title)

April 6, 1981

(Date)

OIL CONSERVATION COMMISSION

APPROVED

MAY 22 1980

BY

Original Signed by FRANK T. CHAVEZ

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.