

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved
Budget Bureau No. 1004-0135
Expires August 31, 1985
5. LEASE DESIGNATION AND SERIAL NO.
SF 079042
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT" for such proposals.)

1. OIL WELL ☐ GAS WELL ☒ OTHER ☐		7. UNIT AGREEMENT NAME Northeast Blanco Unit	
2. NAME OF OPERATOR Blackwood & Nichols Co., Ltd.		8. FARM OR LEASE NAME #1, Sec. 925	
3. ADDRESS OF OPERATOR P. O. Box 1237, Durango, CO 81302-1237		9. WELL NO. 423	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 625' F/NL - 740' F/EL		10. FIELD AND POOL, OR WILDCAT Basin Fruitland Coal	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6133' GL	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 8, T30N, R7W		12. COUNTY OR PARISH Rio Arriba	
13. STATE New Mexico			

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐	WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐	FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐	SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
REPAIR WELL ☐	CHANGE PLANE ☐	(Other) <u>Change Elevation</u> ☒	
(Other) ☐		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for markers and zones pertinent to this work.)*

Change graded elevation to 6133'.

RECEIVED
BUREAU ROOM
66 DEC 27 PM 3:47
FARMINGTON RESOURCE AREA
FARMINGTON, NEW MEXICO

RECEIVED
JAN 1 - 1989
OIL CON. DIV.
DIST. 3

18. I hereby certify that the foregoing is true and correct

SIGNED William F. Clark TITLE Operations Manager DATE December 14, 1988
William F. Clark
(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

DEC 30 1988

FARMINGTON RESOURCE AREA

*See Instructions on Reverse Side
NMOCC