

DISTRICT II
P.O. Drawer DD, Arizola, NM 88210

DISTRICT III
1000 Rio Arriba Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Blackwood & Nichols Co., Ltd.		Well API No. 30-039-24365
Address P. O. Box 1237, Durango, Colorado 81302-1237		
Reason(s) for Filing (Check proper box)		
New Well ☐	Change in Transporter of: Oil ☐ Dry Gas ☒	Other (Please explain) ☐
Recompletion ☐	Casinghead Gas ☐ Condensate ☐	
Change in Operator ☐		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Northeast Blanco Unit	Well No. 411	Pool Name, including Formation Fruitland Coal	Kind of Lease State, Federal or Fee	Lease No. SF-079001A
Location				
Unit Letter <u>G</u> : <u>1465</u> Feet From The <u>North</u> Line and <u>1350</u> Feet From The <u>East</u> Line				
Section <u>10</u> Township <u>30N</u> Range <u>7W</u> , NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ Giant Transportation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 12999, Scottsdale, Az. 85267	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Blackwood & Nichols Co., Ltd.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1237, Durango, CO. 81302	
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 10
	Twp. 30N	Rge. 7W
Is gas actually connected?		When?
No		8/90

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	Xif Res'v
		X	X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RAB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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 Tank	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
		AUG 17 1990	

GAS WELL			
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF/D	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-In)	Casing Pressure (Shut-In)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Roy W. Williams
Signature
Roy W. Williams Administrative Manager
Printed Name Title
August 8, 1990 (303) 247-0728
Date Telephone No.

OIL CONSERVATION DIVISION
DIST. 3

Date Approved AUG 17 1990
By [Signature]
Title SUPERVISOR DISTRICT #3

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.