NO. OF COPIES RECEIVED	<b></b>			
CHSTRIBUTION SANTAFE /	NE		O OIL CONS	
F.LE /		REC	QUEST FOR	R AL ND
U.S.G.S.	AUTHORI	ATION T	O TRANSF	
LAND OFFICE				
TRANSPORTER OIL /	_			
GAS /				
PRORATION OFFICE				
perator				
Blackwood & Nich	ols Company			
P. O. Box 1237,	Durango, Co	lorado i	81301	
Reason(s) for filing (Check proper bo				
ew Well	Change in Tro	nsporter of:		
ecompletion	Oil		Dry Gas Condensate	X
hange in Ownership	Casinghead G	ds	Condensate	
change of ownership give name d address of previous owner				
-				
ESCRIPTION OF WELL AND	LEASE	Well No.	Pool Name, 1	nclud
Northeast Blanco	Unit	3	Blane	o N
ocation.				
Unit Letter <u>L</u> ; <u>16</u>	50 Feet From T	he <b>S</b>	Line on	d
	ownship 30N	Bo	ange <b>7W</b>	
Line of Section 5 , To	Moc duranno	- 110	inge / W	
ESIGN/ TION OF TRANSPOR	RTER OF OIL AN	D NATUI	RAL GAS	d=0.00
ame of Authorized Transporter of O		ensate 🛣	Ad	dress
Inland Corporation  Game of Authorized Transporter of Co	asinghead Gas	or Dry Gas	Ad	P.C
El Paso Natural Ga				P. 0
f well produces oil or liquids,	Unit Sec.	3 1	Rge. Is	gas a
ve locat on of tanks.	L 5	30N	7W	
this pro luction is commingled w	ith that from any o	ther lease	or pool, give	e con
OMPLE TION DATA	Oil V	/ell Go	s Well Ne	w We
Designate Type of Complete	ion = (X)	!	1	
ate Spud led	Date Compl. Read	y to Prod.	То	tal D
	NT	a Pare -/ '		p Oil
col	Name of Producin	y rormation		
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HOLE SIZE  EST DATA AND REQUEST IN THE WELL  ate First New Oil Run To Tanks  length of Test	FOR ALLOWABL  Date of Test	ING, CASI	must be after for this depth	recov or be
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Field Superintendent (Title)

(Date)

## RVATION COMMISSION ALLOWABLE

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

ORT OIL AND NATURAL GAS

Other (Please explain)

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•	and1080	)	_ Feet From	The W			
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-	P.O. Box Address (Give a	k 1528	3, Farm	ington, N	iew Mexic	o 87401	
				ngton, Ne			
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	APPROVE	·			11	9	
	BY Original Signed by Emery C. Arnold						
	SUPERVISOR DIST. #3						
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	If this i	s a requ	est for allo	compliance of compliance of the compliance of th	ewly drilled	or deepene	
	If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 111.						
	All sec	All sections of this form must be filled out completely for allowable on new and recompleted wells.					
	Fill on	t Section	ns I II II	I and VI on	y for chang	es of owne	
	well name o	r numbe	r, or transpo	orter, or other s	such change	of conditio	
	Separat	e Forms	s C.⇒1U4 mu	ist be filed f	or each poo	i in muitip	