(,	VO. OF COMES NECEIMED								
!	. ISTRIBUTION	CONSERVATION C		Form C-104 Supersedes Old C-104 and					
}	SANTA FE	REQUEST	REQUEST FOR ALLOWABLE						
}	U.S.G.S.	AND Effective 1-1-65							
ŀ	LAND OFFICE	AUTHORIZATION TO TR	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS						
	TRANSPORTER OIL /								
ł	OPERATOR /	1							
.[PRORATION OFFICE	1							
	Operator Blackwood & Nichols Co., Ltd. Address								
		rango, Colorado 81301							
Ì	Reason(s) for filing (Check proper box	Other (Please explain)							
١	New Well XX	Change in Transporter of: Oil Dry C	ags []						
1	Recompletion Change in Ownership		ensate						
	f change of ownership give name and address of previous owner								
J. <u>J</u>	DESCRIPTION OF WELL AND	LEASE Well No. Pool Name, Including	Formation	Kind of Lease	Lease ?				
j	Northeast Blanco Unit	30A Blanco Mesa	_	h '	lor Kee Federal SF 078				
-	Northeast Blanco Unit	Joh Dianco Nesa							
	Unit Letter I; 17	90 Feet From The South L	ine and 970 *	Feet From	The <u>East</u>				
	Line of Section 12 To	waship 30N Range	4. W8	мрм, San C	Juan Cour				
I. :	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL G	AS		ved copy of this form is to be sent)				
Ì	Inland Corporation P.O. Box 1528, Farmington, New Mexico 874 Name of Authorized Transporter of Casinghead Gas or Dry Gas X Address (Give address to which approved copy of this form is to be sent)								
Ì	El Paso Natural Gas Company P.O. Box 990, Farmington, New Mexico 87401								
-	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually con						
	give location of tanks.	1 1 1	No	I					
		th that from any other lease or pool	l, give commingling	order number:					
٠,	COMPLETION DATA	Oil Well Gas Well	New Well Works	over Deepen	Plug Back Same Res'v. Diff. Re				
١	Designate Type of Completi-		X	i i					
Ì	Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.				
Į	5-9-78	7-29-78	6065'		6021 Tubing Depth				
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	5096		5810'				
	6415' GL Mesaverde				Depth Casing Shoe				
	5096' 5400' 56 ho		holes		6065'				
		TUBING, CASING, A			SACKS CEMENT				
	HOLE SIZE	CASING & TUBING SIZE		TH SET	275				
-	12 1/4"	9 5/8"	25 359		300				
	8 3/4" 6 1/4"	4 1/2"		0' 6065' liner					
į	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to the for this denth or be for full 24 hours)								
	TEST DATA AND REQUEST F OIL WELL	OK ALLOWABLE (Test must be able for this	acpost or on jor jors are						
Ī	Date First New Oil Run To Tanks			(Flow, pump, gas li					
	Length of Test	Tubing Pressure	Casing Pressure		Mrs. 13 10 W.				
	Actual Pred. During Test	Oil-Bble.	Water - Bbls.	_	Gas-ICF AUG CON: 3				
l	Cour Dis								
,	GAS WELL	Length of Test	Bbls. Condensate	/MMCF	Gravity of Condensate				
	Actual Prod. Test-MCF/D Not tested	Condition Laws	l) = 1250 MCF					
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure		Choke Size				
	Pitot 2500 MCF	Shut-in 535 PSI	Shut-in 53		<u></u>				
۱ . ا	CERTIFICATE OF COMPLIAN	CE	1	4	ation commission 4 197 8				
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		ית ותו	APPROVED					
		with and that the information give e best of my knowledge and belie:	in Origin	TY OIL & GASTAN					
			II DEPU	IT UN COUNTY	to the state of th				

DeLasso Loos

(Signature)

(Title) 8-10-78 (Date)

District Manager

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

SF 078581

2	give comming	ling order	number:						
7	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.			
i	х			į	!				
1	Total Depth			P.B.T.D.					
	6065'			6021'					
1	TopX数数/Gas Pay			Tubing Depth					
1	5096			5810 '					
_1				Depth Casin	Depth Casing Shoe				
h	oles			6065	6065'				
D	CEMENTIN	RECOR)						
4	DEPTH SET			SACKS CEMENT					
		253'			275				
		3590'			300				
	3427'	- 6065	' liner		300				
_				<u>i</u>					
	ter recovery of oth or be for fu Producing Me	ill 24 hours,)		Carlo Carlo	10			
	Casing Press	ur o		Chok Si	AUG 1 2 1 CON.	010			
	Water-Bbls.			Gas - MCF	Ang COM.	3			
	<u> </u>				OID DIS				
	Bbls. Conder	sate/MMCF	-	Gravity of	Condensate				
	Estimate	$d \circ = 1$	1250 MCF						
	Casing Press	we (Shut-	in)	Choke Size	•				
	Shut-in	535 PS	SI						
٦				ATION CO	MMISSION				
1				_					
	APPROV			4 1973)			
	0,	Original Signed by FRANK T. CHAVEZ							
	TITLE This form is to be filed in compliance with RULE 1104.								
Ì									
į									
	If this is a request for allowable for a newly drilled or deepens 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 allow able 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 conditions.								
	H								