Submit 5 copies Appropriate District Office DISTRICT 1 P.O. Box 1980, Hobbs, NM 88240

DISTRICT III

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

1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico Energy, Minerals and Natural Resources Department

## OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

I.												
Name of Operator:	Black	wood & Nicho	ols Co., Ltd.	•	Well API No.: 30-045-27147							
Address of Operator:	P.O.	Box 1237, Du	ırango, Colo	rado 8130	2-1237							
Reason(s) for Filing (che	ck prop	er area):	Other	r (please	explain)		n	FR		WER		
New well: X				Change	e in Transport	er of:	Ins	' B G	/ Ca i			
Recompletion: Change in Operator:			Oil:	head Gas:		Dry	Gas: 🛂 💟 ensate:	1111	.31	1000		
			Casting	jiicau yas.	· 		cisate.	301	.01	1330		
If change of operator giv and address of previous o		:		· · · · · · · · · · · · · · · · · · ·			′C		ON SIST.	. DIV.		
II. DESCRIPTION			D LEASE			<del></del>	٠.			<del>-</del>		
Lease Name: Northeast Blanco Unit	Well No 439	.: Po	ol Name, Inc Basin Fr			Kind Of Lease State, Federal Or Fee: SF-079082						
LOCATION						· • • • • • • • • • • • • • • • • • • •		t				
Unit Letter: M;	1110 ft.	from the So	outh line an	d 1060 ft	. from the Wes	it line						
Section: 13	「o⊌nship	o: 30N i	Range: 84, N	MPH, C	ounty: San Ju	Jan						
III. DESIGNATIO	N OF	TRANSP	ORTER O	F OIL	AND NATU	RAL G	AS					
Name of Authorized Transp Giant Transporta		f Oil: or	Condensate:	X	1		to send app 99, Scottsda			this form.)		
Name of Authorized Trnspt Blackwood & Nicho		singhead Gas	or Dry	Gas: X	Address (Giv P.O		to send app 37, Durango,		• •			
If well produces oil or l give location of tanks.	iquids,	Unit Se		Rge.	is gas actu	ally conne	ected? No		Wheg	90		
If this production is com	mingled	with that fo	rom any other	r lease or	pool, give co	mmingling	order numbe	r:				
THE COUNTRICK	<b>73.88</b> 3											
IV. COMPLETION Designate Type of Complete		Oil Well	Gas Well	New Wel	ll Workover	Deepen	Plug Back	Same 1	Res'v	Diff Res'v		
Date Spudded: 11-17-89	Date Co	mpl. Ready t	to Prod.: 2	X -8-90		Total Dep	Total Depth: 2966:			P.B.T.D.: 2963*		
Elevations (DF, RKB, RT,	ition:	'			Tubing Depth:							
	95 G		<del></del>	land Coal	20/11 20/11	Denth Ca	56 2800 sing Shoe:	!	2963	2726		
Perforations: Open hole with an uncemer	nted pre	-perforated	liner. (277	51-29661)9	2800 – 2764	5º a 30	_	7	7° a 28	3691		
	+	TUBING	CASING	AND	CEMENTIN	G RECO	RD					
HOLE SIZE	<b>-</b>		TUBING SIZE		DEPTH SE	T	SACKS CEMENT					
12.25"		9.62			5251		448 cf Class B Neat					
8.75"	<b>-</b>	7.00			2775 '		1063 cf PO	1063 cf POZ MIX/118 cf Class B				
6.25"	<b>_</b>		00" Liner		2711' - 2		Uncemented					
	<u> </u>	2.87	/5"	<u> </u>	2726'			None				
V. TEST DATA AN	D RE	Quest F	OR ALLO	WABLE								
OIL WELL					lume of load o	oil and mu	st be equal	to or e	xceed	top allowable		
Date First New Oil Run To		Date of Test:			Producing M (Flow, pump	ft, etc)	<del></del>					
Length of Test:		Tubing Pressure:			Casing Pres	sure:		Choke Size:				
Actual Prod. Test:		Oil-Bbls.:	<del> · . · </del>		Water - Bbl		Gas-MCF:					
GAS WELL To be tes	ted; con	mpletion gau	ges: 4652 M	ICFD (wet	²" pitot )					<del></del>		
Actual Prod. Test - MCFD: Length of Test: 4652 MCFD (wet) 1 Hr.					Bbls. Condensate/MMCF: Gravity of Condensate:				): 			
Testing Method: Completion Gauge	nod: Tubing Pressure:				Casing Pressure: Choke Size							
VI. OPERATOR CE	RTIF							RVAT1		DIVISION		
I hereby certify th Division have been is true and complet	complie	d with and i	that the inf	ormation (	given above	Date	Approved			1 1990		
		Roy W. V	Jilliams				Ву					
Signature						Titl	Title 3					
Title: Operations Manager		Date: _	<del></del>				SU	PERVI	SOR	DISTRICT #		
Telephone No.: (303) 247	r-0728					ı						

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 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.

Submit 5 Copies Appropriate District Office PISTRUCT J F.O. Rox 1980, Hobbs, NM 88240

## Energy, Minerals and Natural Resources Department

Revised 1-1-89 See Instructions at Rotteen of Page

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

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III TORE Rio Bianos Rd., Artec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Wall Art No. Operator 30-045-27147 Blackwood & Nichols Co, Ltd. P. O. Box 1237, Durango, Colorado 81302-1237 Other (l'lease explain) Reason(k) for Filing (Check proper box) Change in Transporter of: New Well Dry Can Oil Recompletion Caringhead Gas [ ] Condensate [ Change in Operator If change of operator give name and address of previous operator II. DESCRIPTION OF WELL AND LEASE Lesse No. SF-079082 Well No. | Pool Name, Including Formation | Basin Fruitland Coal Kind of Lease State, Federal or Fee Northeast Blanco Unit Location 1110 Feet From The South Line and 1060 \_\_\_ Feet From The \_ Unit Letter M :\_\_\_\_ County 8W , NMI'M, San Juan Section 13 Township 30N Range III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Hause of Authorized Transporter of Oil or Condensate  $\mathbf{x}$ P. O. Box 12999, Scottsdale, Az. 85267 Giant Transportation Address (Give address to which approved copy of this frem is to be sent) Name of Authorized Transporter of Cazinghead Gas or Dry Gan X P. O. Box 1237, Durango, CO. 81302 Blackwood & Nichols Co., Ltd. Rge. Is gas actually connected? Twp. Unit Sec. 8/90 No\_ rive location of tanks. \_\_M 30N 8W 13 If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oll Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Rea'v | Mil Rea'v Designate Type of Completion - (X) X Total Depth P.B.T.D. Date Compl. Ready to Frod Date Spanded Top Vil/Vai Fay **Tubing Depth** Name of Producing Formation Elevations (I)F. RAB, RI, GR, etc.) Dejth Casing Shoe l'ciforations TUBING, CASING AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE HOLE SIZE TIEST BATA AND REQUEST FOR ALLOWABLE

)11, WELL (Lest must be of Date Litst New Oil Run To Tank	Date of Test	Producing welling (Flow, many, gal in. etc.)
Length of Test	Tubing Pressure	Casing Picksule AUG1 5 1990 Choke Size
Actual Frod. During Test	Oil - Bbls.	Water - Bi CON. DIV Gas- MCF

GAS WELL Gravity of Condensate lible Condensate/MMCF Length of Test Actual Find, Teat - MCI/D Choke Size Casing Freenire (Shut-in) Tubing Pressure (Shut-in) Testing Method (pitet, back pr.)

## 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.

Date

R nv nvallari-	9'
Signature Roy W. Williams	Administrative Manager
	Title
August 8, 1990	(303) 247-0728
August 0, 1770	Lelephone No.

OIL CONSERVATION DIVISION AUG 1 6 1990

Date Approved るべく By. SUPERVISOR DISTRICT #3

Tille \_\_\_\_\_

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

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- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Till 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.

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State of New Mexico Energy, Minerals and Natural Resources Department Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

DISTRICT H P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

REQUEST FOR ALLOWABLE AND AUTHORIZATION

DISTRICTIII 1000 Rio Biazon Rd., Aziec, NM 87410

P.O. Box 2088									
Santa Fe, New Mexico	87504-2088								

Operator	·	OTTIV	11131	<u> </u>	11 OIL	MIND IN	TOTIVE GA	VO Well A	.FI No.				
Blackwood & Nichols Co, Ltd.							30-	30-045-27147					
P. O. Box 1237, Durang	go, Colo	rado 8	3130	2-1	.237								
Reason(s) for Filing (Check proper box)						Oth	et (l'lease expla	iin)		-			
New Well		Change in		•	,								
Recompletion $\square$	Oil		Dry (										
Change in Operator	Caringhead	Gas	Cond	iensai	le 📋			····					
f change of operator give name address of previous operator							P	······································					
I. DESCRIPTION OF WELL Lease Name	AND LEA	Nell No.	Pool	Nam	e Includir	ng Formation	<del></del>	Kind	of Lease	<del>1 - i</del> ;	ease No.		
Northeast Blanco Unit	ļ.	39				itland (	Coal		Federal or Fee	SF-0	79082		
Location			·				·						
Unit LetterM	_ :11	10	_ Feet	Fron	The So	uth Li	e and	Fe	et From The	West	Line		
Section 13 Townshi	p <b>30N</b>	· · · · · · · · · · · · · · · · · · ·	Rang	ţe	8W	, N	мрм,	San Juar	ı		County		
II. DESIGNATION OF TRAN	SPORTE			ND	NATUI								
Name of Authorized Transporter of Oil Giant Transportation		or Conde	nra(e	[3	J				copy of this form				
Name of Authorized Transporter of Casin	olvesd Class	[ t	or I)	rv C	IN X			<del> </del>	copy of this form				
· .	Rican Gas	لـــا	or D	ıy U	·• LAJ	*See		исп орркачеа	сору ој назјот	1 43 W D€ 3€	:ru j		
*See Below If well produces oil or liquids,	Unit	Unit Sec. Twp. Rge.					ly connected?	When	7				
ti well produces on or figures,	1 M	3ec.	130N		8W	re Ran acmai		No	8/9	0			
I this production is commingled with that	·	_ <del></del> _				ing order nun		<u>-</u>					
IV. COMPLETION DATA	, par		,,										
		Oil Wel	iΤ	Ga	s Well	New Well	Workover	Deepen	Plug Back S	ame Res'v	Diff Res'v		
Designate Type of Completion						J <u> </u>	1	<u> </u>	i,i_				
Date Spaidded	Date Comp	d. Ready t	o Prod	L		Total Depth			P.B.T.D.				
Elevations (DF. RKB, RT, GR, atc.) Name of Producing Formation					Top Oil/Gas Fay			Tubing Depth					
Perforations					• •	! :		· · · · · · · · · · · · · · · · · · ·	Depth Casing	Shoe			
	<b>r</b>	UBING	. CA	SING	GAND	CEMENT	ING RECOR	W .	<u>.L.</u>				
HOLE SIZE		SING & T				1	DEPTH SET		SA	CKS CEM	ENT		
-:11		<del></del>								_			
			_	-		ļ	· .		<u> </u>				
u geer kirii ikk dexile	er ead A	CLOW	/ A 13 I	<u>r</u>		l			J				
V. TEST DATA AND REQUE OIL WELL (Lest must be after	SI FUK /	SLLUIV otal volum	ADL e of la	ad nil	and must	be equal to	or exceed ton all	lowable for th	is depth or be for	full 24 hor	ws.)		
Date First New Oil Run To Tank	Date of Te		. 0, 100	-10 041			Aethod (Flow, p						
DECTRICE OF NOTION	Date of 1e						EME	INE	וווי				
Length of Test	Tubing Fre	Tubing Pressure			Casing District U L			Size					
Actual Frod. During Test	Oil - Bbis.			Water Bo	AUG1	3 1990	Gas- MCF						
		<del>.</del>				<u></u>	NI CO	N. DI	<del>/</del>				
GAS WELL Actual Prod. Test - MCI/ID Length of Test					Bbls. Condensate/MhClST. 3			Gravity of Condensate					
lesting Method (pitot, back pr.)	Tubing Fi	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size					
						·							
VI. OPERATOR CERTIFIC	CATE OF	COM	PLL	۸N	CE	1		MSEDV	ATION E	אואוכוי	ON		
I hereby certify that the rules and regu							OIL COI	NOLITY	AHONE	71 4 101	J14		
Division have been complied with an			iven at	жуче				. ∆1	IG 121	000			
is true and complete to the best of my	knowieage i	na venei.				Da	le Approve	ed	OU TO	UCC			
R. W. Walharin						11	Oriainal	Signed by	CHARLES GH	JESUN			
						Ву							
Signature Roy W. Williams Printed Name	Adminis	strati	ve M		ager			NI 0 040	INCOCOCO -				
August 8, 1990	(303) 2	247-07				'''	C TELUIT	JIL & GAS	INSPECTOR, E	<del>151. #3</del>			

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\*Meridian Oil Gathering, Inc.

P. O. Box 4289

Farmington, NM. 87499

\*Northwest Pipeline Co.

P. O. Box 58900

Salt Lake City, Ut. 84158-0900