Submit 5 copies Appropriate District Office

P.O. Box 1980, Hobbs, NM 88240

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

Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

OIL CONSERVATION DIVISION P.O. Box 2088

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

I.

DISTRICT I

DISTRICT III

Name of Operator: Blackwood & Nichols Co., Ltd. Well API No.: 30-045-27327 P.O. Box 1237, Durango, Colorado 81302-1237 Address of Operator: Reason(s) for Filing (check proper area): Other (please explain) New well: X Change in Transporter of: Recompletion: Oil: Dry Gas: Change in Operator: Casinghead Gas: Condensate: If change of operator give name and address of previous operator: DESCRIPTION OF WELL AND LEASE Pool Name, Including Forma Basin Fruitland Coal Well No.: 451 Kind Of Lease State, Federal Or Fee: lease Name: Northeast Blanco Unit Lease No. SF-079082 LOCATION Unit Letter: B; 210 ft. from the North line and 1900 ft. from the East line Section: 6 Towns The State of County: San Juan III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil: or Condensate: X Address (Give address to send approved copy of this form.) **Giant Transportation** P.O. Box 12999, Scottsdale, AZ 85267 Name of Authorized Trnsptr of Casinghead Gas: or Dry Gas: X Address (Give address to send approved copy of this form.) Blackwood & Nichols Co, Ltd. P.O., Box 1237, Durango, CO 81032-1237 If well produces oil or liquids, Unit give location of tanks. When? Is gas actually connected? Twp. **30N** Rge. Mo 06/90 If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA New Weli Designate Type of Completion (X) Oil Well Gas Well Workover Plug Back Deepen Same Res'v Diff Res'v Date Spudded: 08-21-89 Date Compl. Ready to Prod.: Total Depth: P.B.T.D.: 03-30-90 30061 30061 Elevations (DF, RKB, RT, GR, etc): Name of Producing Formation: Top Oil/Gas Pay: Tubing Depth: 6206' KB Fruitland Coal 28691 3015 Perforations: Depth Casing Shoe: Open hole with an uncemented pre-perforated liner. (2869'-3096') 5.50"liner 3095'; 7" a 2869' TUBING CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT 12.25" 9.625" 3121 218 cf Class B Neat 8.75" 7.000" 28691 792 cf Poz Mix/115 cf Class B Neat 6.25" 5.500" liner 28201-30951 2.875" 3015 V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be e for this depth or be for full 24 hours.) Date First New Oil Run To Tank: Producing Method: (Flow, pump, gas, Date of Test: lift, etc) OIL CON. Length of Test: Tubing Pressure: Chok 1157: 3 Casing Pressure: Actual Prod. Test: Oil-Bbls.: Water - Bbls.: Gas-MCF: GAS WELL To be tested; completion gauges: 4.206 MMCFPD (wet 2" pitot), and 514 BWD Actual Prod. Test - MCFD: 4.206 (wet) Length of Test: Bbls. Condensate/MMCF: N/A Gravity of Condensate: N/A 1 Hr Casing Pressure: (shut-in) 1610 psig Testing Method: Completion Gauge Tubing Pressure: (shut-in) Choke Size: 1590 psig 2" pitot OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above Date Approved Than 31, 1990 is true and complete to the Dest of my knowledge and belief.

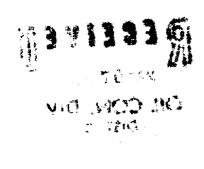
William F. Clark By Griginal Signed by FRANK T. CHAYEZ \* PINKTZIO DOBITANCE Date: 3 May 90 Title: Operations Manager

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

(303) 247-0728

Telephone No.:

- 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.



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