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Appropriate District Office
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DISTRICT III

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

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

**REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS**

I.

Name of Operator: Blackwood & Nichols Co. A Limited Partnership Well API No.: 30-045-27417

Address of Operator: P.O. Box 1237, Durango, Colorado 81302-1237

Reason(s) for Filing (check proper area): Other (please explain)

New well: Change in Transporter of:

Recompletion: Oil: Dry Gas:

Change in Operator: X Casinghead Gas: Condensate:

If change of operator give name
and address of previous operator: Blackwood & Nichols Co. Ltd.

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OCT 29 1990

OIL CON. DIV.
DIST. 3

II. DESCRIPTION OF WELL AND LEASE

Lease Name: <u>Northeast Blanco Unit</u>	Well No.: <u>463</u>	Pool Name, Including Formation: <u>Basin Fruitland Coal</u>	Kind Of Lease State, Federal Or Fee:	Lease No. <u>SF-079073</u>
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LOCATION

Unit Letter: J; 2485 ft. from the South line and 2400 ft. from the East line

Section: 18 Township: 30N Range: 7W, NMPH, County: San Juan

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil: or Condensate: <u>X</u> <u>Giant Transportation</u>	Address (Give address to send approved copy of this form.) <u>P.O. Box 12999, Scottsdale, AZ 85267</u>
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Name of Authorized Trnspr of Casinghead Gas: or Dry Gas: <u>X</u> <u>Blackwood & Nichols</u>	Address (Give address to send approved copy of this form.) <u>P. O. Box 1237, Durango, Colorado 81302-1237</u>
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If well produces oil or liquids, give location of tanks.	Unit <u>J</u>	Sec. <u>18</u>	Twp. <u>30N</u>	Rge. <u>7W</u>	Is gas actually connected? <u>No</u>	When? <u>10/90</u>
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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 <u>X</u>	New Well <u>X</u>	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
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Date Spudded: <u>2-23-90</u>	Date Compl. Ready to Prod.: <u>6-16-90</u>	Total Depth: <u>3197'</u>	P.B.T.D.: <u>3197'</u>
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Elevations (DF, RKB, RT, GR, etc.): <u>6270' GL</u>	Name of Producing Formation: <u>Fruitland Coal</u>	Top Oil/Gas Pay: <u>2914'</u>	Tubing Depth: <u>3060'</u>
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Perforations: <u>3176-3081'; 3063-3033'; 3005-3985'; 2966-2946 (8 MPF, 0.625)</u>	Depth Casing Shoe: <u>5" @ 3178</u>	<u>7" @ 2914'</u>
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TUBING CASING AND CEMENTING RECORD

MOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<u>12.25"</u>	<u>9.625"</u>	<u>302'</u>	<u>354 cf Class B</u>
<u>8.75"</u>	<u>7.000"</u>	<u>2914'</u>	<u>713 cf 65/35 POZ</u>
<u>6.25"</u>	<u>5.500" Liner</u>	<u>2860 - 3178</u>	<u>Uncemented</u>
	<u>2.875"</u>	<u>3060'</u>	

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 greater than 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)	<u>OCT 24 1990</u>
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Length of Test:	Tubing Pressure:	Casing Pressure:	<u>OIL CON. DIV.</u>
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Actual Prod. Test:	Oil-Bbls.:	Water - Bbls.:	Gas <u>NO</u> <u>DIST. 3</u>
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GAS WELL To be tested; completion gauges: 3311 MCFD (dry 2" pitot)

Actual Prod. Test - MCFD: <u>3311 MCFD (dry)</u>	Length of Test: <u>1 Hr.</u>	Bbls. Condensate/MMCF: <u>N/A</u>	Gravity of Condensate: <u>N/A</u>
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Testing Method: <u>Completion Gauge</u>	Tubing Pressure: (shut-in) <u>1410 psig</u>	Casing Pressure: (shut-in) <u>1460 psig</u>	Choke Size: <u>2" pitot</u>
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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.

R.W. Williams
Signature

Roy W. Williams

Title: Administrative Manager

Date: 10/25/90

Telephone No.: (303) 247-0728

OIL CONSERVATION DIVISION

Date Approved OCT 29 1990

By _____

Title Supervisor
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 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.