

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: September 30, 1990

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill, deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT-" for such proposals.

SUBMIT IN TRIPLICATE

1. Type of Well: oil well \_\_\_\_\_ gas well ☒ other \_\_\_\_\_

2. Name of Operator: Blackwood & Nichols Co., A Limited Partnership

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

4. Location of Well: (Footage, Sec., T., R., M., or Survey Description)

Surface: 1830' FSL, 830' FEL Section 12, T30N, R2W Bottomhole: 1376' FSL, 840' FML Section 7, T30N, R7W

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5. Lease Designation & Serial #:

SF-079042

6. If Indian, Allottee/Tribe Name

7. If Unit or CA, Agmt. Design.:

Northeast Blanco Unit

8. Well Name and No.:

N.E.B.U.# 461

9. API Well No.:

30-045-28222

10. Field & Pool/Explry Area:

Basin Fruitland Coal

11. County or Parish, State:

San Juan, New Mexico

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input checked="" type="checkbox"/> Altering Casing and Hole Size
	<input type="checkbox"/> Other:
	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection

13. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

Propose to alter casing from approved APD as follows:

Size of Hole	Size of Casing	Weight per Foot
14 3/4	10 3/4	40.5# WC50
9 7/8	7 5/8	29.7# K-55
6 3/4	5 1/2	23# N-80

RECEIVED

APR 08 1991

OIL CON. DIV.]

14. I hereby certify that the foregoing is true and correct.

Signed: R.W. Williams ROY W. WILLIAMS

Title: ADMINISTRATIVE MANAGER

Date: 3/21/91

(This space for Federal or State office use)

Approved By \_\_\_\_\_  
Conditions of approval, if any:

Title \_\_\_\_\_

Date \_\_\_\_\_

APPROVED

APR 02 1991

Ken Thompson  
FOR AREA MANAGER