

OIL CONSERVATION DIVISION

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

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

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

I.

Name of Operator: Blackwood & Nichols Co. A Limited Partnership	Well API No.: 30-045-28222
Address of Operator: P.O. Box 1237, Durango, Colorado 81302-1237	
Reason(s) for Filing (check proper area):	Other (please explain) _____
New well: <input checked="" type="checkbox"/> 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: _____	

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II. DESCRIPTION OF WELL AND LEASE

Lease Name: Northeast Blanco Unit	Well No.: 461	Pool Name, Including Formation: Basin Fruitland Coal	Kind Of Lease State, Federal Or Fee:	Lease No. SF-079042
LOCATION Unit Letter: I; file	Surface: 1830 ft. from the South line and 830 ft. from the East line			
Section: 12	Township: 30N	Range: 8W	NMPM, County: San Juan	
Unit Letter: K	Bottom Hole: 1402 ft. from the South line and 799 ft. from the West line			
Section: 7	Township: 30N	Range: 7W	NMPM, County: San Juan	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil: or Condensate: <input checked="" type="checkbox"/> X Giant Transportation	Address (Give address to send approved copy of this form.) P.O. Box 12999, Scottsdale, AZ 85267					
Name of Authorized Trnspr of Casinghead Gas: or Dry Gas: <input checked="" type="checkbox"/> X Blackwood & Nichols	Address (Give address to send approved copy of this form.) P.O. Box 1237, Durango, Colorado 81302					
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 7	Twp. 30N	Rge. 7W	Is gas actually connected? NO	When? 10/91
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 <input checked="" type="checkbox"/> X	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded: 11-02-90	Date Compl. Ready to Prod.: 11-29-90		Total Depth: 3850' (MD)		P.B.T.D.: 3850' (MD)			
Elevations (DF, RKB, RT, GR, etc): 6340' KB		Name of Producing Formation: BASIN FRUITLAND COAL		Top Oil/Gas Pay: 3638'		Tubing Depth: 3621'		
Perforations: Open Hole No Liner		3638 - 3850 MD 3638 - 3250 TVD		Depth Casing Shoe: 7" at 3638'				

TUBING CASING AND CEMENTING RECORD

MOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
14.750"	10.750"	300'	566 cf Class B
9.875"	7.625"	3638'	1249 cf Halliburton Lite/147 cf Class B
	2.375"	3621'	

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 exceed 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)	
Length of Test:	Tubing Pressure:	Casing Pressure:	Choke Size:
Actual Prod. Test:	Oil-Bbls.:	Water - Bbls.:	Gas-MCF:

GAS WELL To be tested; completion gauges: **492 MCFD (2" Pitot Dry); TSTM BMD**

Actual Prod. Test - MCFD: 492 MCFD (2" Pitot Dry)	Length of Test: 1 Hr.	Bbls. Condensate/MMCF: N/A	Gravity of Condensate: N/A
Testing Method: Completion Gauge	Tubing Pressure: (shut-in) 1500 psig	Casing Pressure: (shut-in) 1540 psig	Choke Size: 2" Pitot

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.

Mark S. Manson
Signature
Title: **Operations Engineer**
Date: 10-18-91
Telephone No.: **(303) 247-0728**

OIL CONSERVATION DIVISION

OCT 29 1991
Date Approved _____
By [Signature]
Title **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.