

5	
SECTION	
STATE	
FILE	
U.S.A.S.	
LAND OFFICE	
TRANSPORTER	OIL /
	GAS /
OPERATOR	
REGISTRATION OFFICE	
Operator	

NEW EXERCISE OF OIL AND NATURAL GAS PRODUCTION
RULES FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form O-104
Supersedes O-104 and O-170
Effective 1-1-65

Blackwood & Nichols Company

Address

P. O. Box 1237, Durango, Colorado 81301

Reason(s) for filing (Check proper box)

New Well ☒ Changes in Transporter of: Oil ☐ Gas ☐
Recompletion ☐ Oil ☐ Gas ☐
Change in Ownership ☐ Oil ☐ Gas ☐

Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Northeast Blanco Unit	63	Bianco Messverde	State, Federal or Fee Fee	
Location				
Unit Letter	M	1100 Feet From The South	Line and 990 Feet From The West	
Line of Section	1	Township	31N	Range 7W
			Range 7W	San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or of Gas ☒	Address (Give address to which approved copy of this form is to be sent)
Inland Corporation	P.O. Box 1528, Farmington, New Mex. 87401
Name of Authorized Transporter of Oil or Gas ☐ or of Gas ☒	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	P.O. Box 990, Farmington, New Mex. 87401
If well produces oil or liquids, give location of tanks.	Is gas actually marketed? When
	No

If this production is commingled with that from any other lease or wells, give commingling order number: None

IV. COMPLETION DATA

Designate Type of Completion - (X)	Old Well	New Well	Revised	Old Well	Revised
		X			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
10-7-76	11-2-76	6075'	6035'		
Elevations (L.F., A.B., R.F., G.R., etc.)	Name of Producing Formation	Top Oil/Gas Pay	Timing Depth		
6559 GL	Messverde	5820	6010'		
Perforations			Depth Casing Shoe		
5820' - 6020'			6072'		
TUBING, CASING, AND CEMENTING RECORD					
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
12-1/4"	9-5/8"	218'	225		
8-3/4"	7"	3063'	225		
6-1/4"	4-1/2"	6072'	325		

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test on the first day of the month of test or on the first day of the month of test for AN 24 hours)

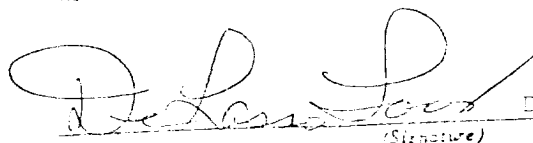
Date First New Oil Run To Tanks	Date of Test	Flowing Pressure (at 100' pump, 100' lift)	Choke Size
Length of Test	Flowing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Rel. Condensate/MCF	Gravity of Condensate
Q=3265	3 hours	None	None
Testing Method (prior, back pr.)	Flowing Pressure (at 100' lift)	Flowing Pressure (at 100' lift)	Choke Size
Back Pressure	1025	1025	3/4"

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.


DeLasso Loos
(Signature)

Field Superintendent
(Title)

November 22, 1976
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____

BY Original Signed _____

TITLE _____

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.