UNITED STATES  DEPARTMENT OF THE INTERIOR  GEOLOGICAL SURVEY	5. LEASE  NM 03358  6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS  (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9–331–C for such proposals.)  1. oil gas well other	7. UNIT AGREEMENT NAME NEBU Agrmt. No. 1, Sec. 929 8. FARM OR LEASE NAME Northeast Blanco Unit 9. WELL NO.
2. NAME OF OPERATOR Blackwood & Nichols Co., Ltd.  3. ADDRESS OF OPERATOR P.O. Box 1237, Durango, Co. 81301  4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 790' F/SL - 1190' F/WL AT TOP PROD. INTERVAL: Same AT TOTAL DEPTH: Same  16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF  FRACTURE TREAT	206  10. FIELD OR WILDCAT NAME  South Los Pinos-Fruitland PC  11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  M-10-31N-7W  12. COUNTY OR PARISH 13. STATE  San Juan New Mexico  14. API NO.  15. ELEVATIONS (SHOW DF, KDB, AND WD)  6625 GL
FRACTURE TREAT	

- 17. 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.)\*
- Spudded 12 1/4" hole at 12:30 PM, 3-19-81. 3/4° at 215'. Ran 5 jts. 9 5/8" 36.00# H-40 csg; 194' landed at 208'. Plug down 6:45 PM, 3-19-81. Cement circulated. Tested 9 5/8" casing to 800 PSI for 30 minutes, held OK.
- Ran 121 jts. 4 1/2" 10.50# K-55 csg; 3677' landed at 3690'. Float collar 3-25-81 at 3657'. Cemented with 150 sacks Howco Lite cement with 1/4# flocele per sack, followed with 290 sacks 50-50 Pozmix with 2% gel,.075 of CFK-2, 6 1/4# Gilsonite per sack and 10% salt. Washed out with 20 bbls. chemical wash ahead of cement. Worked casing 10 feet while cementing. Plug down 10:30 AM, 3-25-81.

Subsurface Safety Valve: Manu. ar	d Type	Set @	Ft.
18. hereby certify that the forego	ing is true and correct  SO Loos TITLE District	Manager DATE 3-26-81	
	(This space for Federal or St	ate office use)	
APPROVED BY	TITLE	DATE	· 