

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO NM 03358
2. NAME OF OPERATOR Blackwood & Nichols Co., Ltd.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 1237, Durango, Colorado 81301		7. UNIT AGREEMENT NAME NEBU Agreement No. I, Sec. 929
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 790' F/SL - 1190' F/WL		8. FARM OR LEASE NAME Northeast Blanco Unit
14. PERMIT NO.		9. WELL NO. 206
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6637' KB		10. FIELD AND POOL, OR WILDCAT South Los Pinos-Fruitland-PC
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA M-10-31N-7W
		12. COUNTY OR PARISH San Juan
		13. STATE New Mexico

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>

(Other) Test Nacimiento for water disposal

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>

(Other) _____

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)*

Propose to isolate the Ojo Alamo perforation from 2427' to 2536' with a cement retainer set at 2370'. Then perforate the Nacimiento Formation from 1804-1838' (34'), 1852-1864' (12'), 1920-1956' (36'), 1990-2006' (16'), 2158-2166' (8'), 2190-2206' (16') and 2236-2250' (14'), for a total of 136' with 1 or 2 SPF. Breakdown the perforations and then test formation water for quality. Test formation for water injectivity response. Then secure New Mexico Oil Conservation Division's approval for disposal. Before disposal into Nacimiento the Ojo Alamo perforation would be squeezed off with cement.

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

SIGNED W. F. Clark
William F. Clark

TITLE Operations Manager

DATE June 16, 1988

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side

NMOCC

RECEIVED
JUN 21 1988
OIL CON. DIV.
DIST. 9