

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

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

5. LEASE DESIGNATION AND SERIAL NO

SF080557

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. ☐ OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR
Blackwood & Nichols Co., Ltd.

3. ADDRESS OF OPERATOR
P. O. Box 1237, Durango, CO 81302

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
320' FSL, 1250' FWL

14. PERMIT NO.
30-045-27265

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
6314' GL

7. UNIT AGREEMENT NAME
Northeast Blanco Unit

8. FARM OR LEASE NAME
Northeast Blanco Unit

9. WELL NO.
449

10. FIELD AND POOL, OR WILDCAT
Basin Fruitland Coal

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Section 19, T31N, R7W

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 ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☐

CHANGE PLANS ☒

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☐

(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.)*

Drilling program has been changed since this well was originally permitted. This well will be an open hole completion. The casing program will be as follows:

Hole Size	Csg. Size	Wt./Ft.	Setting Depth	Quantity of Cement
12-1/4"	9-5/8"	36#	300'	207 cf to circulate
8-3/4"	7"	23#	3000'	975 cf to circulate
6-1/4"	5-1/2"	23#	3225'	uncemented liner

RECEIVED
DEC 01 1989
OIL CON. DIV.
DIST. 3

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

SIGNED William F. Clark
William F. Clark

TITLE Operations Manager DATE 10-31-89

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

APPROVED

NOV 28 1989

AREA MANAGER
FARMINGTON RESOURCE AREA

*See Instructions on Reverse Side