Submit 5 copies Appropriate District Office DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND MATURAL GAS

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

I.											
Name of Operator: Black	wood & Nichola	s Co. A Lim	ited Pa	artnersh	ip l	ell API No.	: 30-045-	2768	7		
Address of Operator:	P.O. Box 123	7, Durango,	Colora	ado 813	02-1237						
Reason(s) for Filing (chec	k proper area;):	Other	(please	explain)		100	1550 Film	giá tổ	32 S. S.	
New well:				Chang	e in Transport	ter of:		رځ		T L	
Recompletion: Change in Operator: X			Oil: Caaimab	haad Caa		Dry Ga	in a	.	******************************		
			casingn	head Gas		Conden	sate:	00	HEST.	עופט	
If change of operator give and address of previous ope		(wood & Nich	hols Co	o., Ltd.		-) \$ 1 _	CON.		
II. DESCRIPTION	OF MEIT	AND LE	ASE						F1431"	3	
Lease Name: Well No.: Pool Name, Inc. Northeast Blanco Unit 500 Basin Fr			incl	uding Fo	ormation: Coal		Kind Of Lease State, Federal Or Fee:			Lease No. SF-078988	
Unit Letter: D; 4	75 ft. from t	he North Liu	ne and	425 ft	from the Ue	et lina					
			di	423 ((· ITOIL CIE ME	st tine					
Section: 20 To	wnship: 31N	Range: (6U, NH	PM, C	ounty: San Ju	uan	····				
INI. DESIGNATION	OF TRAN	SPORTE	R OF	OIL	AND NATU	RAL GAS	3				
Name of Authorized Transportation	on	or Condens	sate: X	(Address (Gi	ve address t . Box 12999	o send ap , Scottsda	prove l e, /	ed copy of NZ 85267	this form.	
Name of Authorized Trnsptr Blackwood & Nichol		Gas: or	r Dry G	as: X	Address (Giv	e address to 0. Box 1237 ,					
If well produces oil or lic give location of tanks.	quids, Unit D	Sec. 1	Гwр. 31N	Rge.	Is gas actua	ally connect	ed? No		When?	1-91	
If this production is commi	ngled with the	at from any	other		pool, give co	ommingling o	rder numbe	r:/_	_1		
IV. COMPLETION D	ATA										
Designate Type of Completic	on (X) Oil We	ell Gas W	lell	New We	ll Workover	Deepen I	lug Back	San	ne Res'v	Diff Res'v	
Date Spudded: 5-10-90 Da		Total Depth	: 33361	F	P.B.T.D.:	33361					
Elevations (DF, RKB, RT, GR, etc): Name of Producing Forms 6378 RKB Fruitland Coal					ition:	1	op Oil/Gas Pay: Tubing Depth: 3011' 3038'				
Perforations: Open hole no liner run						Depth Casir	Depth Casing Shoe: 7" at 3011'				
	TUB	ING CAS	ING	AND	CEMENTING	RECOR	D				
HOLE SIZE	CASING	CASING & TUBING SIZE			DEPTH SET		SACKS CEMENT				
12.25"		9.625"			3081		295 cf Class B				
8.75"		7.000"			3011'		276 cf 65/35 POZ/148 cf Class B				
6.25"		5.500° liner					Uncemented				
		2.875"			30381						
V. TEST DATA AND	REQUEST	FOR AI	LLOW	ABLE							
OIL WELL (To	est must be at or this depth	ter recover or be for	ry of t	total vo 4 hours.	lume of load o	il and must	be equal	to or	exceed t	op allowable	
Date First New Oil Run To T	Test:			Producing Method: (Flow, pump, gas, lift, etc)							
Length of Test:	Pressure:	ressure:			sure:		Choke Size:				
Actual Prod. Test:	tual Prod. Test: Oil-Bbls.:				Water - Bbls.:		1	Gas-MCF:			
GAS WELL To be tested	; completion	gauges: 4	34 MCF	D (dry i	?" pitot); 50	BPDW				٠.	
Actual Prod. Test - MCFD: 434 MCFD (dry)	of Test:			Bbls. Condensate/MMCF:		Gravity of Condensat		ondensate			
Testing Method: Completion Gauge				a	Casing Press (shut-in)	ure: 1150 psid	re: Choke Size: 2" pitot				
VI. OPERATOR CERTIFICATE OF COMPLIANCE						OIL CONSERVATION DIVISION					
I hereby certify that the rules and regulations of the Oil Con Division have been complied with and that the information gi is true and complete to the best of my knowledge and belief.					iven above		Date Approved 007 2 9 1990				
Mr Mr Mann Roy W. Williams					•	Ву					
ignature						Title_					
Title: Administrative Manager Date: $\frac{10/26}{9}$							SUPERVISOR DISTRICT #3				

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

Telephone No.: (303) 247-0728

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.

¹⁾ Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.