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TRANSPORTER	OIL
	GAS
OPERATOR	2
PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
**REQUEST FOR ALLOWABLE
 AND
 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS**

Form O-104
 Supersedes Old O-104 and O-110
 Effective 1-1-65

Operator
 Blackwood & Nichols Co., Ltd.
 Address
 P. O. Box 1237, Durango, Colorado 81301

Reason(s) for filing (Check proper box)

New Well	<input type="checkbox"/>	Change in Transporter of:	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>	Other (Please explain) Name change: Blackwood & Nichols Company to Blackwood & Nichols Co., Ltd.
Recompletion	<input type="checkbox"/>	Condensed Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>		
Change in Ownership	<input type="checkbox"/>				

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Northeast Blanco Unit	51	Blanco Mesaverde	State, Federal or Fee	Federal 079045

Location
 Unit Letter N ; 500 Feet From The S Line and 2065 Feet From The W
 Line of Section 29 Township 31N Range 7W , NMPM, San Juan County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Condensed Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Northwest Pipeline Corporation	P. O. Box 90, Farmington, New Mex. 87401

If well produces oil or liquids, give location of tanks.
 Unit Sec. Twp. Rge.
 Is gas actually connected? Yes When November 12, 1957

If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA

Designate Type of Completion -- (X)	Oil Well <input type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Prod. <input type="checkbox"/>	Diff. Prod. <input type="checkbox"/>
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.S.T.D.					
Abbreviations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Perforations			Depth Casing Shoe					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing 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	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (Pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

I. 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 District Manager
 (Signature)
 District Manager
 (Title)
 May 3, 1977
 (Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____

BY ORIGINAL SIGNED BY H. E. MAXWELL, JR.

TITLE PETROLEUM

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 tribulation 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.