

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

Lower DD, Artesia, NM 88210

INSTRUCTIONS
1000 Rio Brazos Rd., Artec, NM 87410REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Blackwood & Nichols Co., Ltd.		Well API No. 30-039-24321
Address P. O. Box 1237, Durango, Colorado 81302-1237		
Reason(s) for Filing (Check proper box) ☐ Other (Please explain)		
New Well ☐	Change in Transporter of:	
Recompletion ☐	Oil ☐ Dry Gas ☒	
Change in Operator ☐	Casinghead Gas ☐ Condensate ☐	
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Northeast Blanco Unit	Well No. 417	Pool Name, Including Formation Basin Fruitland Coal	Kind of Lease State, Federal or Fee	Lease No. E-289-23
Location Unit Letter <u>M</u> : <u>1190</u> Feet From The <u>South</u> Line and <u>800</u> Feet From The <u>West</u> Line Section <u>2</u> Township <u>30N</u> Range <u>7W</u> , NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ Giant Transportation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 12999, Scottsdale, Az. 85267	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Blackwood & Nichols Co., Ltd.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1237, Durango, CO. 81302	
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 2
	Twp. 30N	Rge. 7W
	Is gas actually connected? <u>No</u> When? <u>8/90</u>	

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.	☒	☒					
Elevations (DF, RAB, RI, GR, etc.)	Name of Producing Formation	Total Depth		F.B.T.D.				
Perforations	Top Oil/Gas Pay		Tubing Depth					
		Depth Casing Shoe						
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT				

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or greater than 10% of total volume or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Production Method (Flowline, Pump, Gas Lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.
		CHOKES
		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

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

R W Williams
Signature
Roy W. Williams Administrative Manager
Printed Name
August 9, 1990 (303) 247-0728 Title
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved AUG 17 1990By [Signature]
Title SUPERVISOR DISTRICT 13

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

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only 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.