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LAND OFFICE			
TRANSPORTER	OIL		
	GAS	1	
OPERATOR		2	
PRORATION OFFICE			

	SANTA FE / FILE / ~	REQUEST I	REQUEST FOR ALLOWABLE AND ON TO TRANSPORT OIL AND NATURAL GAS			Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65		
1.	I HANSPORTER OIL GAS / OPERATOR 2 PRORATION OFFICE							
	Operator Blackwood & Nichols Company Address							
	P.O. Box 1237, Durango, Colorado 81301							
	Reason(s) for filing (Check proper box	Change in Transporter of:	Other (Please	explain,				
	Recompletion Change in Ownership	Oil Dry Gas Casinghead Gas Conden	FF 1					
	If change of ownership give name and address of previous owner							
II.	DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation Kind of Lease Lease					Lease No.		
	Northeast Blanco Unit	33 Blanco Mesaver	rde	State, Federal or Fe	* Federal	03358		
	Unit Letter N; 990	Feet From The S Line	e and 1650	Feet From The	W			
	Line of Section 12 To	wnship 31N Range 70	, NMPM	San .	<u>luan</u>	County		
III.	DESIGNATION OF TRANSPOR Name of Authorized Transporter of Or	TER OF OIL AND NATURAL GA	Address (Give address	to which approved co	py of this form is to	o be sent)		
	Name of Authorized Transporter of Ca	ssinghead Gas or Dry Gas 🋣	Address (Give address	to which approved co	py of this form is to	be sent)		
	Northwest Pipeline C	orporation	501 Airport Dr	Parmington	n. New Mex.	87401		
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. P.ge.	Is gas actually connect Yes	Man	rch 24, 195	5		
IV.	If this production is commingled with COMPLETION DATA	ith that from any other lease or pool,			Back Same Res	'v. Diff. Res'v.		
	Designate Type of Completi	on - (X) Gas Well	New Well Workover	;	i i			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B	.T.D.			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tub	ing Depth			
	Perforations Depth Casing Shoe							
		TUBING, CASING, AND	DEPTH S	1	SACKS CEM	IENT		
	HOLE SIZE	CASING & TUBING SIZE						
₩.	TEST DATA AND REQUEST F	FOR ALLOWABLE (Test must be a	fter recovery of total vol	ume of load oil and m	ust be equal to or e	xceed top allow-		
ν.	OIL WELL Date First New Oil Run To Tanks	able for this de	Producing Method (Flor	-,				
		Tubing Pressure	Casing Pressure		Choke Size			
	Length of Test		Water - Bbls.	Gas	(off)	19.		
	Actual Prod. During Test	Oil-Bbls.	Water - Bbis.	7	ML Like			
	GAS WELL				JAN 15	- de la constant		
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMC	F G	OIL CON. C	om./		
	Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (Shu	t-in) Cho	DIST. 3			
VI.	CERTIFICATE OF COMPLIAN	ICE	OIL	CONSERVATE	T 10/7			
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.			BY Original Signed by A. R. Kendrick PETROLEUM ENGINEER DIST. NO. 3					
								Original Signed
	by DeLasso Loos	DeLasso Loos	If this is a request for allowable for a newl well, this form must be accompanied by a tabul tests taken on the well in accordance with RU			ly drilled or deepened ation of the deviation		
	Field Super	tests taken on the	well in accordance of this form must be	S MICE MOLE 11	1.			
	January	2, 1974	able 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.					
	(L	Date)	Wett name or number, or transported or other					