				,			
NO. OF COPIES RECEIVED							
DISTRIBUTION	NEW		ISERVATION COMMISSION	Form C-104			
SANTA FE /		REQUEST F	OR ALLOWABLE	Supersedes Old C-104 and C-1 Effective 1-1-65			
FILE / ~			AND				
U.S.G.S.	AUTHORIZA	TION TO TRAN	INSPORT OIL AND NATURAL GAS				
LAND OFFICE							
TRANSPORTER OIL /							
G AS /	_						
OPERATOR /							
PRORATION OFFICE				· · · · · · · · · · · · · · · · · · ·			
Cherator Blackwood & Nich	ols Company						
Address							
P. O. Box 1237,		ado 81301					
Reason(s) for filing (Check proper be	ox)		Other (Please explain)				
New Well	Change in Trans						
Recompletion A	Cil	Dry Gas	<u> </u>				
Change in Ownership	Casinghead Gas	Condens	ate				
If change of ownership give name							
and address of previous owner							
DESCRIPTION OF WELL AND	D LEASE	l l	, Including Formation	Kind of Lease			
Northeast Blanco Un	nit	9 Blanco	Mesaverde	State, Federal of Fee			
Location N	990 Feet From The	S Line	and 1970 Feet F	rom The			
12	30N	Range 8W	, _{NMPM} , San	Juan County			
Line o: Section	cwnship 500	Range	, Month Mar				
DESIGNATION OF TRANSPO	RTER OF OIL AND	NATURAL GAS	Address (Give address to which	approved copy of this form is to be sent)			
Name of Authorized Transporter of C		sate (as)		gton, New Mexico 87401			
		r Dry Gas 🛣	Address (Give address to which	approved copy of this form is to be sent)			
Name of Authorized Transporter of C El Paso Natura		_	P.O. Box 990, Fa:	rmington, New Mexico 87401			
If well produces oil or liquids,		Twp. Rge.	Is gas actually connected?	When			
give locat on of tanks.	N 12	30N 8W	Yes	5-8-68			
give locat on of tanks. If this pro luction is commingled							
give locat on of tanks. If this pro luction is commingled COMPLE TION DATA	with that from any oth	er lease or pool, g	ive commingling order number	: None en Plug Back Same Res'v. Diff. Res'			
If this pro luction is commingled. COMPLE TION DATA Designate Type of Comple	with that from any oth	er lease or pool, g	ive commingling order number	None Plug Back Same Res'v. Diff. Res			
give locat on of tanks. If this pro luction is commingled COMPLE TION DATA	with that from any oth	er lease or pool, g	New Well Workover Deepe	P.B.T.D.			
give locat on of tanks. If this pro luction is commingled. COMPLE TION DATA Designate Type of Comple	with that from any oth	Gas Well Gas Vell to Prod.	ive commingling order number New Well Workover Deepe	None Plug Back Same Res'v. Diff. Res			
If this pro luction is commingled. COMPLE TION DATA Designate Type of Comple	with that from any oth tion - (X) Date Compl. Ready	er lease or pool, g	New Well Workover Deepe X Total Depth 5460	Plug Back Same Res'v. Diff. Res' P.B.T.D. Tubing Depth			
If this pro luction is commingled COMPLE TION DATA Designate Type of Comple Date \$555.55 Workover 4-13-68	with that from any oth tion - (X) Date Compl. Ready 4-24-6	Gas Well X to Prod. 58 Formation	New Well Workover Deepe X Total Depth	P.B.T.D. Tubing Depth 5283			
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DeLasso Loos

Original Signed

by Delasso Louis

(Signature)

(Date)

Field Superintendent 5/10/68

	DOVED	•				MHI	19	
APPROV BY	Original	Signe	d by	Ā.	R.	Kendri	c x	
	PETR	LEUM	ENGI	VEE	R I	DIST. NO	J. 3	

TITLE .

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 tabulation 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 Sections I, II, III, and VI only for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.