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

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

I.

Operator Blackwood & Nichols Co., Ltd.	
Address P. O. Box 1237, Durango, Colorado 81301	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Northeast Blanco Unit	Well No. 23A	Pool Name, Including Formation Blanco Mesaverde	Kind of Lease Federal State, Federal or Fee	Lease No. SF 079042
Location Unit Letter F ; 1800 Feet From The N Line and 390 Feet From The W Line of Section 6 Township 30N Range 7W , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Inland Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1528, Farmington, New Mexico 87401	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 990, Farmington, New Mexico 87401	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected? When No

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.
		X	X					
Date Spudded 6-8-78	Date Compl. Ready to Prod. 7-24-78		Total Depth 5985'		P.B.T.D. 5943'			
Elevations (DF, RKB, RT, GR, etc.) 6358' GL	Name of Producing Formation Mesaverde		Top Oil/Gas Pay 5190'		Tubing Depth 5920'			
Perforations 5190' - 5458' - 48 holes, 5544' - 5900' - 52 holes					Depth Casing Shoe 5985'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	9-5/8"		223'		175 sacks			
8-3/4"	7"		3565'		300 sacks			
6-1/4"	4-1/2" liner		3402'-5985'		300 sacks			

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 exceed top allowable for this depth or be for full 24 hours)


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 No test	Length of Test Est. Q=1100 MCF	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, rock <input checked="" type="checkbox"/>) Pitot	Tubing Pressure (Shut-in) 520 PSI	Casing Pressure (Shut-in) 520 PSI	Choke Size

VI. 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
(Signature)

District Manager
(Title)

August 2, 1978
(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 4 1978, 19____
BY Original Signed by A. N. Hendrick
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 only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.