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

Form C-104
Supersedes OHA C-101 and C-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)	Other (Please explain) Name change:
New Well ☐	Change in Transporter of:
Recompletion ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☐	Condensate Gas ☐ Condensate ☐
Blackwood & Nichols Company to Blackwood & Nichols Co., Ltd.	

If change of ownership give name
and address of previous owner.

DESIGNATION OF WELL AND LEASE		Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Lease Name Northeast Blanco Unit		62	Blanco Mesaverde	State, Federal or Fee Federal	03357
Location					
Unit Letter	L	1470	Feet From The	S	Line and 1250
Feet From The		W			
Line of Section	30	Township	31N	Range	6W
, NMPM,		Rio Arriba	County		

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Oil ☐ or Condensate ☐			
Name of Authorized Transporter of Condensate Gas ☐ or Dry Gas ☒		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.
			Range
			Is gas actually connected? When
			Yes November 22, 1961

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

COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Prod.	Diff. Prod.
Designate Type of Completion -- (X)									
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		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 lead oil and must be equal to or exceed test allowable for this depth or be for full 24 hours)

OIL WELL		Producing Method (Flow, pump, gas lift, etc.)	
Date First New Oil Run To Tanks	Date of Test	Casing Pressure	Choke Size
Length of Test	Tubing Pressure	Water - Bbls.	Gas - MCF
Actual Prod. During Test	Oil - Bbls.		

GAS WELL		Bbls. Condensate/MCF	Gravity of Condensate
Actual Prod. Test-MCF/D	Length of Test	Casing Pressure (Shut-in)	Choke Size
Testing Method (flow, tank pr.)	Tubing Pressure (Shut-in)		

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)

May 3, 1977
(Date)

DeLASSO LOOS

OIL CONSERVATION COMMISSION

APPROVED

ORIGINAL SIGNATURE OF A. E. FARNELL, JR.

BY PETROLEUM ENGINEER DIST. NO. 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 1111.

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.