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LAND OFFICE	
TRANSPORTER	OIL
	GAS 1
OPERATOR	2
PRODUCTION OFFICE	

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

Operator Blackwood & Nichols Co., Ltd.			
Address P. O. Box 1237, Durango, Colorado 81301			
Person(s) for filing (Check proper box)		Other (Please explain) Name change:	
New Well ☐	Change in Transporter of:	Blackwood & Nichols Company to	
Recompletion ☐	Oil ☐	Blackwood & Nichols Co., Ltd.	
Change in Ownership ☐	Casinghead Gas ☐	Condensate ☐	

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE		Kind of Lease		Lease No.
Lease Name	Well No.	Pool Name, including Formation	State, Federal or Fee	
Northeast Blanco Unit	38	Blanco Mesaverde	Federal	079043
Location				
Unit Letter	B	520	Feet From The	N
Line and		2420	Feet From The	
E				
Line of Section	31	Township	31N	Range
7W		, NMPM,		San Juan
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 Casinghead Gas ☐	or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)	
El Paso Natural Gas Company		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	
Yes		November 15, 1957	

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	Stim. Res't.	Diff. R'ty.
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 top 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		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL		Gravity of Condensate	
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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.

De Lasso Loos DeLasso Loos
(Signature)
District Manager
(Title)
May 3, 1977
(Date)

OIL CONSERVATION COMMISSION
APPROVED _____, 19____
BY ORIGINAL SIGNED BY E. E. PAXNELL, JR.
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 tribulation 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.