AO. OF COPIES REC	EIVED		
DISTRIBUTE		_	
SANTA FE			
FILE			
U.S.G.S.		_	
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		_
OPERATOR			_
		_	

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	SANTA FE FILE		ONSERVATION COMMISSION FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65	
	U.S.G.S.	ALITHODIZATION TO TRAI	AND NSPORT OIL AND NATURAL G	245	
	LAND OFFICE	AUTHORIZATION TO TRAI	NO OK TOLE AND HATOKAL O		
	TRANSPORTER OIL				
	GAS				
	OPERATOR				
I.	PRORATION OFFICE Operator				
	Blackwood & Nichols	Co., Ltd.			
	Address				
	Reason(s) for filing (Check proper box)	ango, Colorado 81301	Other (Please explain)		
	New Well	Change in Transporter of:			
	Recompletion	Oil Dry Gas	\square Producing For	mation Change	
	Change in Ownership Casinghead Gas Condensate				
	If change of ownership give name				
	and address of previous owner				
11.	DESCRIPTION OF WELL AND I	Well No. Pool Name, Including Fo	traction Kind of Lease	Lease No.	
	Northeast Blanco Unit 201 South Los Pinos Fruitland-PC State, Federal or Fee Fee				
	Location 'E	201 Bouth has I mas	Traffiana 10		
	Unit Letter M ; 99	O Feet From TheSouthLine	and 1030 Feet From	The West	
		2137	711	Courty Courty	
	Line of Section 9 Tow	nship 31N Range	7W , NMPM, San J	uan County	
111	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	S		
111.	Name of Authorized Transporter of Oil	X or Condensate	Address (Give address to which approx	ved copy of this form is to be sent)	
	Inland Corporation		P.O. Box 1528, Farmin Address (Give address to which approx	gton, New Mexico 87401	
	Name of Authorized Transporter of Cas				
	Northwest Pipeline Co	rporation Unit Sec. Twp. P.ge.	Is gas actually connected? Who	ton, New Mexico 87401	
	If well produces oil or liquids, give location of tanks.		Yes D	December 12, 1979	
	If this production is commingled wit	h that from any other lease or pool,	give commingling order number:		
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
	Designate Type of Completio	n = (X) X	x	Х	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	6-30-79	7–24–79	3750	3537	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top May/Gas Pay	Tubing Depth 3473	
	6652 GL	Fruitland	3472	Depth Casing Shoe	
	3482 - 3494 - 1	1 holes		3750	
	3402 3494 1	TUBING, CASING, AND	CEMENTING RECORD		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	12 1/4"	9 5/8" 4 1/2"	219 ' 3748'	200 sacks 490 "	
	7 7/8"	4 1/2	3748	430	
V.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil pth or be for full 24 hours)	and must be equal to or exceed top allow-	
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	ift, etc.)	
	Date First New Oil Run 15 Tunks				
	Length of Test	Tubing Pressure	Casing Pressure	Chote Size	
			Water - Bbls.	Ggs-MCF	
	Actual Prod. During Test	Oil-Bbls.	7 4 4 4		
				OL COR COM.	
	GAS WELL			DIST 3	
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensats/MMCF	Cravity of Condensa	
	No retest	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
	Testing Method (pitot, back pr.)	Tubing Field and Commercial			
vi	CERTIFICATE OF COMPLIANCE	CE	OIL CONSERV	ATION COMMISSION	
**	CERTIFICATE OF COMPENS	-	OIL CONSERVATION COMMISSION DEC 3 v 1980		
	I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED, 19		
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		Original Signed by FRANK T. CHAVEZ			
	~ _		TITLE SUPERVISOR DISTR	ICT # 3	
	()) /		compliance with RULE 1104.	
/	H. L. H	To The Total account of the state of the sta		wable for a newly drilled or deepened	
	(Signature) well, this form must be accompanied by a tabulation of the deviation of the dev			anied by a tabulation of the deviation or the deviation ordance with RULE 111.	
	District Manager All sections of this form must be filled out completely for all				
-	(Title) able on new and recompleted wells.			veils.	
		ite)	well name or number, or transpor	rter, or other auch change of condition.	
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