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DISTRIBUTION				
SANTA FE				
FILE				
u.s.g.s.				
LAND OFFICE				
TRANSPORTER	OIL			
TRANSFORTER	GAS			
OPERATOR				
PRORATION OFFICE				
Operator				
Blackwood & Nicho				
Address				
P. O. B	ox 12	37,	Dı	
Reason(s) for filing (Check proper box				
New Well	لعا			
Recompletion				
Change in Ownership				

NEW MEXICO OIL CONSERVATION COMMISSION

SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11 Effective 1-1-65
FILE U.S.G.S.	AUTHORIZATION TO TR	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS	
LAND OFFICE	AUTHORIZATION TO TRA	ANSFORT OIL AND NATURAL	GAS
TRANSPORTER OIL			
GAS			
OPERATOR PRORATION OFFICE			
Operator			
Blackwood & Nicl	nols Co., Ltd.		
Address D. O. Boy 1237	Duranga Co 81301		
Reason(s) for filing (Check proper	Durango, Co. 81301	Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion	Oil Dry Go Casinghead Gas Conde	≒	
Change in Ownership	Casinghead Gas Conde	made	
If change of ownership give nam and address of previous owner_	e		
DESCRIPTION OF WELL AN	ID LEASE	Cormation Kind of Lea	
Lease Name	Well No. Pool Name, Including F	State Feder	a
Northeast Blanco Uni	t 48A Blanco Mesa	verde	1 2 1,0 1
Unit Letter 0 ;	1090 Feet From The South Lin	ne and 1720 Feet From	The East
			an Tuan
Line of Section 32	Township 31N Range	7W , NMPM, S	an Juan County
DESIGNATION OF TRANSPORTER OF Authorized Transporter of	ORTER OF OIL AND NATURAL GA	AS Address (Give address to which appr	oved copy of this form is to be sent)
Inland Corporation	on <u>G</u>		gton. New Mexico 87401
Name of Authorized Transporter of	Casinghead Gas or Dry Gas X		oved copy of this form is to be sent)
Northwest Pipeline	Corporation	P.O. Box 90, Farmingt	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. P.ge.		hen
<u> </u>	with that from any other lease or pool,	No No sive commingling order number:	
COMPLETION DATA			Plug Back Same Res'v. Diff. Res'v.
Designate Type of Comple	etion - (X) Oil Well Gas Well	New Well Workover Deepen	Same New York
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
10-6-80	3-22-81	5915'	5850'
Elevations (DF, RKB, RT, GR, etc	Name of Producing Formation	Top XX/Gas Pay 5158	Tubing Depth 5502
6340 GL	Mesaverde	1 3236	Depth Casing Shoe
	384' - 32 holes	5508' - 5620' - 40 hol	e s 5915
	TUBING, CASING, AN	D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT 250 sacks
12 1/4"	9 5/8"	224 '	350 sacks
8 3/4" 6 1/4"	4 1/2" Liner	3382' - 5915'	300 sacks
<u> </u>		<u> </u>	
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be able for this d	epth or be for full 24 hours)	l and must be equal to or exceed up allou
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.
	Tubing Pressure	Casing Pressure	Choke Size
Length of Test	I doing Pleasure		
Actual Prod. During Test	Oil-Bble.	Water-Bbls.	Gas-NCF
CAC WELL			
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Q = 2189	3 hrs	Casing Pressure (Shut-in)	Choke Size
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in) 600 PSI	Casing Pressure (Shut-in) 600 PSI	3/4"
back pr. CERTIFICATE OF COMPLI			ATION COMMISSION
CERTIFICATE OF COMPLI	4100		MAY 11,1981
I hereby certify that the rules a	nd regulations of the Oil Conservation	APPROVED	, 19
n	ed with and that the information given the best of my knowledge and belief.	BY Original Signed by FRANK T. CHAVEZ	
. ~		BY Original Signed by Frontier Supervisor District # 3	
$\neg \cap \cap$)		compliance with RULE 1104.
Ha Land	DeLasso Loos	To all a segment for all	numble for a newly drilled or deepened
CXE CAUSE (S	Signature)	well, this form must be accomp tests taken on the well in acc	raniad by a tabulation of the deviation
D: -+	t Manager		b- ditted out completely for allow

(Title) 4-1-81 (Date) 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.