

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

**SUNDRY NOTICES AND REPORTS ON WELLS**

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)

1. oil well ☐ gas well ☒ other

2. NAME OF OPERATOR  
Blackwood & Nichols Co., Ltd.

3. ADDRESS OF OPERATOR  
P. O. Box 1237, Durango, Colorado 81301

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 1070' F/SL - 990' F/WL  
AT TOP PROD. INTERVAL: Same  
AT TOTAL DEPTH: Same

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☐  
REPAIR WELL ☐  
PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
CHANGE ZONES ☐  
ABANDON\* ☐

SUBSEQUENT REPORT OF:

(other) correct an error on fracture treat report

RECEIVED

AUG 20 1982

U. S. GEOLOGICAL SURVEY

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

5. LEASE  
NM 03356

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME NEBU Agreement  
No. 1, Sec. 929

8. FARM OR LEASE NAME  
Northeast Blanco Unit

9. WELL NO.  
77

10. FIELD OR WILDCAT NAME  
Blanco Mesaverde

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
M-15-31N-7W

12. COUNTY OR PARISH San Juan  
13. STATE New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
6524' GL

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

2nd stage perforations should be:

5440-5446, 5522-5526, 5568-5574, 5610-5618, 2 holes per foot (48 holes).

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

18. I hereby certify that the foregoing is true and correct

SIGNED DeLasso Loos TITLE District Manager DATE August 18, 1982

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

DATE **ACCEPTED FOR RECORD**

AUG 24 1982

\*See Instructions on Reverse Side

FARMINGTON DISTRICT

BY Sm

NMOCC