

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
TRANSPORTER	OIL
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OPERATOR	
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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED
DEC 27 1988
OIL CON. DIV.
DIST. 2

Operator Blackwood & Nichols Company, Ltd.	
Address P. O. Box 1237, Durango, Colorado 81302	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input checked="" type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change of Pool Name R-8568
Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Northeast Blanco Unit	Well No. 211	Pool Name, including Formation Basin Fruitland Coal Gas	Kind of Lease State, Federal or Fee Federal	Lease No. SF079003
Location Unit Letter <u>C</u> : <u>1040</u> Feet From The <u>North</u> Line and <u>1850</u> Feet From The <u>West</u> Line of Section <u>27</u> Township <u>31N</u> Range <u>7W</u> , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

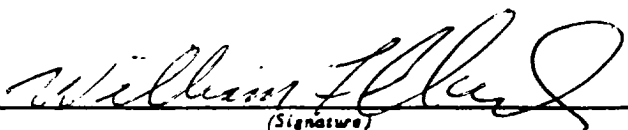
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Giant Industries	Address (Give address to which approved copy of this form is to be sent) P. O. Box 9156, Phoenix, Arizona 85068
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Northwest Pipeline Corp.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 8900, Salt Lake City, Utah 84108-0900
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? when Yes 12-05-88

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.


(Signature)

Operations Manager

(Title)

December 21, 1988

(Date)

OIL CONSERVATION DIVISION

APPROVED DEC 27, 1988
BY Original Signed by FRANK T. CHAVEZ
TITLE SUPERVISOR DISTRICT # 3

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 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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.