STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

January 16, 1988

(Date)

DISTRIBUTIO		
LANTA PE		
FILE		
v.t.d.4.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
DPERATOR		
PROBATION OFFICE		

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06 01 53

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.

REQUEST FOR ALLOWABLE

OPERATOR			14	1D		- ·	
PROBATION OFFICE	AUTHOR	ZATION TO	TRANSP	ORT OIL AND NATU	RAL GAS	No. of the second	
l							
Operator				1 1 1 1 1 1 1 1 1 1			
Blackwood & Nic	hols C	ompany,	Lta.			Dist.	****
Address			-	01202	,		
P. O. Box 1237,	Duran	go, Colo	orado	81302		, _ , 	
Reason(s) for filing (Check proper box)				Other (Please	espiain)		
New Well	Change in Transporter of: Change in Pool Name						
Recompletion	011		Dri	ry Gas			
Change in Ownership	Casin	ghead Gas	c。	nden#die	1-0	767	. <u> </u>
If change of ownership give name and address of previous owner							
II. DESCRIPTION OF WELL AND L	EASE	Pool Name, Inc	luding Ec	rmation	Kind of L	eq10	Lease Ho.
Lease Name	1	South Lo	s Pino	s Fruitland	_	State, Federal or Fee Federal \$F 07901	
Northeast Blanco Unit	215	Sand-Pic	<u>tured</u>	Cliffs	31410, 1		!
Unit Letter D : 790 Line of Section 26 Townshi	211		th Line			om The West Juan	County
III. DESIGNATION OF TRANSPOR	TER OF (OIL AND NA	TURAL	GAS			
Name at Authorized Transporter of Oil	or Co	andensate 🕎		Andress (Give address	to mutch a	pproved copy of this form is	- 05060
Giant Refining Company			P. O. Box 9156, Phoenix, Arizona 85063				
Name of Authorized Transporter of Casingh	opened Gas of Dry Gas vy Address (Give address to which approved copy of this form is to be sent)						
Northwest Pipeline Co	rporati	on		3539 E. 30th S	Street,	Farmington, NM	87401
- In			Rge.	Is gas actually connect	ed?	when	
if well produces oil or liquids, give location of tanks.	1		•	Yes		January 14, 19	986
If this production is commingled with th	at from an	v other lesse	or pool,	give commingling orde	r number:		
					•		
NOTE: Complete Parts IV and V or	s reverse s	ide if necessa	ry.				
	_			ا مال م	ONSER'	VATION DIVISION	
VI. CERTIFICATE OF COMPLIANCE	Ċ			10030			
I hereby certify that the rules and regulations of	of the Oil Co	onservation Divis	ion have	APPROVED	No. of Park	<u> </u>	., 19
been complied with and that the information gi	ven is true at	nd complete to th	ne best of				
my knowledge and belief.		BY BY ERNIE BUSCH					
	0			TITLE 1550		The said with the first of	3
- 11 00	//_						
11.11. ZOV	/ (<u>)</u> .,	14-m F C	lark			In compliance with #U	
Willant 1	74	liam F. C	Talk	If this is a req	uest for a	llowable for a newly dri mpanied by a tabulation	lled of deepened of the deviation
(Signature	, (ĺ	tests taken on the	Mell To w	ccordance with AULE !	11.
Operations Manager						must be filled out comp	
(Title)				able on new and re	completed	i wells.	•