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Appropriate District Office  
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P.O. Box 1980, Hobbs, NM 88240

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DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico  
Energy, Minerals and Natural Resources Department

**OIL CONSERVATION DIVISION**

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

**REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS**

Form C-104  
Revised 1-1-89  
See Instructions  
at Bottom of Page

**I.**

Name of Operator:	Blackwood & Nichols Co., Ltd.	Well API No.:	30-045-27246
Address of Operator:	P.O. Box 1237, Durango, Colorado 81302-1237		
Reason(s) for Filing (check proper area):	Other (please explain) _____		
New well: X	Change in Transporter of: _____		
Recompletion:	Oil:	Dry Gas:	
Change in Operator:	Casinghead Gas:	Condensate:	
If change of operator give name and address of previous operator: _____			

**II. DESCRIPTION OF WELL AND LEASE**

Lease Name: Northeast Blanco Unit	Well No.: 445	Pool Name, Including Formation: Basin Fruitland Coal	Kind Of Lease State, Federal Or Fee:	Lease No. SF-079082
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**LOCATION**

Unit Letter: M; 957 ft. from the South line and 827 ft. from the West line

Section: 25 Township: 31N Range: 8W, NMPN, County: San Juan

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil: or Condensate: X Giant Transportation	Address (Give address to send approved copy of this form.) P.O. Box 12999, Scottsdale, AZ 85267					
Name of Authorized Trnsprtr of Casinghead Gas: or Dry Gas: X Northwest Pipeline	Address (Give address to send approved copy of this form.) P.O., Box 58900, Salt Lake City, UT 84158					
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 25	Twp. 31N	Rge. 8W	Is gas actually connected? No	When? 06/90
If this production is commingled with that from any other lease or pool, give commingling order number: _____						

**IV. COMPLETION DATA**

Designate Type of Completion (X)	Oil Well	Gas Well X	New Well X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded: 09-16-89	Date Compl. Ready to Prod.: 03-07-90				Total Depth: 3303'	P.B.T.D.: 3303'		
Elevations (DF, RKB, RT, GR, etc): 6404' KB	Name of Producing Formation: Fruitland Coal				Top Oil/Gas Pay: 3009'	Tubing Depth: 3217'		
Perforations: Open hole with an uncemented pre-perforated liner. (3009'-3303')					Depth Casing Shoe: 5.50" liner 3300'; 7" @ 3009'			

**TUBING CASING AND CEMENTING RECORD**

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12.25"	9.625"	319'	288 cf Class B Neat
8.75"	7.000"	3008'	811 cf Poz Mix/115 cf Class B Neat
6.25"	5.500" liner	2934'-3300'	Uncemented
	2.875"	3217'	

**V. TEST DATA AND REQUEST FOR ALLOWABLE**

**OIL WELL**

(Test must be after recovery of total volume of load oil and must be equal to or greater than load oil for this depth or be for full 24 hours.)

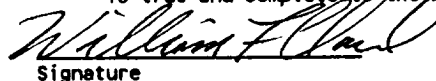
Date First New Oil Run To Tank:	Date of Test:	Producing Method: (Flow, pump, gas, lift, etc)	MAR 26 1990
Length of Test:	Tubing Pressure:	Casing Pressure:	OIL CON. DIV
Actual Prod. Test:	Oil-Bbls.:	Water - Bbls.:	DIST. 3

**GAS WELL** To be tested; completion gauges: 4200 MCFD (wet 2" pitot), and 570 BMD

Actual Prod. Test - MCFD: 4200 (wet)	Length of Test: 1 Hr.	Bbls. Condensate/MMCF: N/A	Gravity of Condensate: N/A
Testing Method: Completion Gauge	Tubing Pressure: (shut-in) 1500 psig	Casing Pressure: (shut-in)	Choke Size: 2" pitot

**VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief.

  
Signature

William F. Clark

Title: Operations Manager

Date: 22 Mar 90

Telephone No.: (303) 247-0728

**OIL CONSERVATION DIVISION**

Date Approved APR 03 1990

By   
Title SUPERVISOR DISTRICT 3

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out Sections I, II, III and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

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