Submit 5 Copies
A propriate District Office
DISTRICT J
F.O. Box 1980, Hobbs, NM 88240

DIAIC OF LICK MICKICO Energy, Minerals and Natural Resources Department Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

L'ISTRICT III 1000 Rio Biazzos Rd., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator							Well X	Well Aff No.			
Blackwood & Nichols Co., Ltd.							30-0	30-045-27286			
P.O. Box 1237, Durango, Colorado 81302-1237											
Reason(s) for Filing (Check proper box) Other (Please explain)										978.7	
New Well (X) Change in Transporter of:											
Recompletion	Oil	_ ,,	Dry Gas	,—			Feet C	DLU1 31	୍ନପ୍	er ster	
Change in Operator	Casinghe	ad Gas	, ,				•		003		
If change of operator give name and address of previous operator						OIL COR. DIV					
II. DESCRIPTION OF WELL AND LEASE						DIST. 3					
Lease Name Well No. Pool Name, Including					ing Formation	ng Formation Kind of			Lease No.		
Northeast Blanco Uni	Northeast Blanco Unit 420 Basin Frui				tland Coal			Federal or Fee SF079043			
Location			-						•,		
Unit Letter	: 103	80 ¹	_ Feet Fro	nn The _	North Line	and148.	5 ¹ Fe	et From The	East	Line	
Section 28 Township	, 31	. N	Range	7W	, Ni	MPM, Sai	n Juan			County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS											
Name of Authorized Transporter of Cil. or Condensate						Address (Give address to which approved copy of this form is to be sent)					
Giant Transportation Content of C						P.O. Box 12999, Scottsdale, AZ 85267					
Name of Authorized Transporter of Casinghead Gas or Dry Gas X						Address (Give address to which approved copy of this form is to be sent)					
	Northwest Pipeline Co.						• •	ake City,			
If well produces oil or liquids,	Unit	Sec.	Twp.	Rge	is gas actuali		When			220.02.72	
give location of tanks.	i	i	j .	i	No	•	Ì	Februa	ry 1990)	
If this production is commingled with that from any other lease or pool, give commingling order number: 1V. COMPLETION DATA											
		Oil Wel	ı j d	as Well	New Well	Workover	Deepen	Plug Back S	ame Res'v	Dill Res'v	
Designate Type of Completion			L_	X	X	<u>[</u>	<u> </u>	l		1	
Date Spudded	Date Compl. Ready to Prod.				Total Depth			P.B.T.D.			
10-07-89	10-18-89				- 	3172			3172'		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Tob Oil/Gar	Top Oil/Gas Pay			Tubing Depth		
6378' GL Fruitland Coal					<u>.</u>]	3026'			3067'		
l'erforations				Depth Casing	Shoe						
Open hole, no lines								<u>1</u>			
	TUBING, CASING AND							T			
HOLE SIZE	CASING & TUBING SIZE					DEPTH SET			SACKS CEMENT		
12.25"		9.625"				311'			lass B	65/25	
8.75"	7.000"				2991'			754 cf Class B 65/35			
	2.875"				3067'			144 cf Class B			
V THE SEE IN A THAT A KING IN EAST HER	E EZSB	X 117330	A 10 I E								
V. TEST DATA AND REQUES OIL WELL (Test must be after r.	or FUR	ALLUW total volume	ADDE	il and mu	et he equal to or	exceed top all	awahle for thi	s depth or be fo	r full 24 how	rs.)	
	·		oj ioda c	u una mu		ethod (Flow, p			, ,		
Date First New Oil Run To Tank Date of Test						culos (1 10 m, p.		,			
Length of Test	Total to Physical				Casing Press	Casing Pressure			Choke Size		
Lengui of Test	Tubing Pressure										
Actual Prod. During Test	Oil - Bbls.				Water - Bbls	Water - Bbls.			Gas- MCF		
Actual Flow During Test	Oii - Duis.										
					Marra (all	•	1.0/0	DI ID			
GAS WELL To be tested;			gauges	s; 615	MCFD (2"	pitot)	and 240	BIVD . TGravity of Co	ndenesia.		
Actual Prod. Test - MCF/D Length of Test					Bbls. Condensate/MMCF			Gravity of Contentate			
				Casing Pressure (Shut-in)			Choke Size				
lesting Method (pitot, back pr.) Tubing Pressure (Shut-in)					Casing 11ess	Casing Present (Once my					
	<u> </u>				-\			t			
VI. OPERATOR CERTIFICATE OF COMPLIANCE					- 11 - 1		VGEDV	ATION D	אועובוכ	M	
I hereby certify that the rules and regulations of the Oli Conservation]		10Litt	,,,,,	,,,,,		
Division have been complied with and that the information given above is true and complete to the best of my knowledge and ballef.					1 .	_		IANA	1 1090		
is the sind confined to the best of this showings and ballet.					Date ApprovedJAN 0 4 1998						
2/1/1/2		ja ,	en en tra		•						
Signature	By_		·-··								
William F. Clark Operations Manager								Rijoen	1100=		
Title // Dec 89 (303) 247-0728					Title	Title					
11 Dec 89	(3		<u>7-0728</u> leptione N								
Date		1 61	charone 14	···							

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 only Sections I. H. III. and VI for changes of operator, well name or number, transporter, or other such changes.