

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

ST. SMITH INSTRUCTIONS
(Other instructions on re-
verse side)

Expires August 31, 1985
3. LEASE DESIGNATION AND SERIAL NO.

SF079043

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME Northeast Blanco Unit	
2. NAME OF OPERATOR Blackwood & Nichols Co., Ltd.		8. FARM OR LEASE NAME Northeast Blanco Unit	
3. ADDRESS OF OPERATOR P. O. Box 1237, Durango, Colorado 81302		9. WELL NO. 446	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 2045' FSL, 1395' FWL		10. FIELD AND POOL, OR WILDCAT Basin Fruitland Coal	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 33, T31N, R7W	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6302' GL		12. COUNTY OR PARISH San Juan	
		13. STATE New Mexico	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WELL SHUT-OFF <input type="checkbox"/>	ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRAC TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRAC TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	Cementing <input type="checkbox"/>
(Other) <input type="checkbox"/>		(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. Directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)			

12-05-89 Spud 12-1/4" surface hole at 7:15 p.m., 12-04-89. Drill to 324'. Run 5 jts 9-5/8" 36# J-55 and 2 jts 9-5/8" 40# K-55 casing (total 303.02'), and set at 315'.
12-06-89 Cement 9-5/8" casing set at 315' with 250 sx (295 cf) Class B neat with 2% CaCl₂ and 1/4 #/sk celloflake. Good circulation throughout job. Circulate 22 Bbls cement. Plug down at 9:30 a.m., 12-05-89.
12-07-89 Pressure test BOPs and 9-5/8" casing to 600 psig for 30 minutes - held OK.
12-08-89 TD at hole 2880'.
12-09-89 Run 67 jts (2868.07') 7" 23# J-55 casing, set at 2880'; insert float at 2836'. Cement with 430 sx (774 cf) 65/35 Poz Class B + 6% gel + .6% Halid 9 + 1/4 #/sk Flocele. Tail in with 125 sx (147.5 cf) Class B + 1/4 #/sk Flocele. Good circulation throughout, plug down at 10:20 a.m., 12-8-89. Circulate 39 Bbls cement to surface. Plug held.

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

SIGNED William F. Clark

TITLE Operations Manager

DATE 17 Jan '90

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

ACCEPTED FOR RECORD

NMOCD

FEB 08 1990

*See Instructions on Reverse Side

FARMINGTON REGIONAL AREA

BY W.F. Clark