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

## State of New Mexico 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

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

DISTRICE II P.O. Drawer DD, Antesia, NM 88210

Santa Fe, New Mexico 87504-2088

1000 Rio Brazos Rd., Aztec, NM 8741	HEQU					AUTHORIZ					
Operator							Well API No.				
Blackwood & Nichols Co., Ltd. Address						30-045-27331					
P.O. Box 1237, D	urango, (	Colorado	s 8	1302-12							
Reason(s) for Filing (Check proper box	)	_	-		Out	iet (Please expla	iin)	•			
New Well	Oil	Change in	Dry G								
Recompletion			Conde	_							
If change of operator give name and address of previous operator											
II. DESCRIPTION OF WEL	L AND LE	ASE									
Lease Name Well No. Pool Name, Includ					- la			of Lease	Code-al as Ess		
Northeast Blanco Unit 408 Basin Frui					tland Coal			Teocial of Tee	SF 07	79045	
Unit LetterA	:	5	Feet F	rom The _N	orth Lin	e and1305	5 Fe	et From The _	East	Line	
Section 20 Town	ship 31N		Range	7W	, N	мрм, San	Juan		<u></u>	County	
III. DESIGNATION OF TRA				ID NATU	RAL GAS					·····	
Name of Authorized Transporter of Oil or Condensale						Address (Give address to which approved copy of this form is to be sent)					
Giant Transportation								dale, AZ 85267			
Name of Authorized Transporter of Casinghead Gas or Dry Gas X  Northwest Pipeline								ake City, UT 84158-0900			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	is gas actual	ly connected?	When	MAY	ch.	90	
If this production is commingled with the IV. COMPLETION DATA	at from any oth				·		······································				
Designate Type of Completion		Oil Well		Gas Well X	New Well	i	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded 11-08-89	1	Date Compl. Ready to Prod.				Total Depth 444 3348'			P.B.T.D. 3224 '		
Elevations (DF, RKB, RT, GR, etc.)  6445' GL  Name of Producing Formation  Basin Fruitland Coal					Top Oil/Gas Pay 3042* 36-35			Tubing Depth 3110'			
					T-3224			Depth Casing Shoe			
Open hole con	mpletion	with an	un	cemente	d pre-pe	rforated	liner.	5-1/2"	Liner (	3223'	
TUBING, CASING AND					·· <del>·······</del>						
HOLE SIZE	CA	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT 266 cf of Class B			
12.25"		9.625"			314'			<del></del>			
8.75"		7.000"			3035'				714 cf of Class G 65/3		
6.25"	$ \frac{5.50}{}$	5.50" uncemented line 2.875"			2949' to 3223' 3110'			1/4 CI	4 CI OI CIASS C.		
V. TEST DATA AND REQU	EST FOR A	ALLOWA	BLE	,	•		11.6.4		G.II 24 hou	1	
OIL WELL (Test must be after Date First New Oil Run To Tank	Date to Ve	olal volume o	oj load	ou and must	Producing M	r exceed top allo lethod (Flow, pu	mp, gas lift,	DEC	EIV	FIN	
Length of Test	Total	Tubia Pressure				Casing Pressure			doke Size		
		FEB 0 7 1990				Water - Bbis.			JAN1 8 1990		
Actual Prod. During Test	Oil - Bbls	OIL CON. DIV.				Water - Doir			OIL CON. DIV		
GAS WELL To be tes	ted: com	plet <b>QIS</b>	Tg3	ges: 2	039' MCI	D (wet) a	and 480	BWD DI	Sτ,		
Actual Prod. Test - MCF/D		Length of Test				Bbls. Condensate/MMCF			Gravity of Condensate		
lesting Method (pitot, back pr.)		Tubing Pressure (Shut-in) 450 psig				Casing Pressure (Shut-in) 1150 psig					
VI. OPERATOR CERTIF				NCE		OIL CON	ISERV	ATION [	DIVISIO	NC	
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.					Date Approved FEB 1 3 1990						
William Flland					By_ Bill Chang						
Signature William F. Clark	Ope	rations	Man	ager_				RVISOR D	ISTRICT	/3	
Printed Name 70 Date	(30	3) 247- Tele			Title	3		· · · · · · · · · · · · · · · · · · ·		<u> </u>	

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, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.

  4) Separate Form C 104 must be filled for each revol in multiply completed wells.