Submit 5 copies Appropriate District Office DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

DISTRICT 11 P.O. Drawer DD, Artesia, NM 88210

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:	lackwood &	Nichols	Co.A Li	mited Pa	ertnership	y u	ell API No	.: 30-045-	27723	·
Address of Operator:	P.O.	Box 1237,	Durang	o, Color	ado 8130	2-1237				
Reason(s) for Filing (check prop	er area):		Other	(please	explain)		17	A 12 1.4 1	14 g. (49)
New well:				•••	Change	e in Transport			PRUS	20
Recompletion: Change in Operator:	x			Oil: Casing	head Gas:		Dry (Cond	Gas:	0070	มูเลอดก เมลดก
If change of operator and address of previous	_	Blac	kwoo	d & Ni	chols (Co. Ltd.			OCT 2 S	N. DIV.
II. DESCRIPTI	ON OF	WELL A	ND I	EASE					DIS	
Lease Name: Northeast Blanco Unit	lanco Unit Well No.: Pool Name			ame, Including Formation: Basin Fruitland Coal				Of Lease e, <u>Federal</u> O		se No. 079003
LOCATION						· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	·	<u></u>	
Unit Letter: l	. ; 1840 fi	t. from th	e South	h line ar	nd 1015 fi	t. from the We	est line			
Section: 35	Township	o: 31N	Range	e: 7V, N	MPM, Co	ounty: San Ju	Jan			
III. DESIGNAT			PORT	ER OI	OIL					
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 Trnsptr of Casinghead Gas: or Dry Gas: X Rlackwood & Nichols						Address (Give address to send approved copy of this form.) P. O. Box 1237, Durango, Colorado 81302-1237				
f well produces oil or liquids, Unit live location of tanks.			Sec. Twp. Rge. 74			Is gas actually connected? No When? 1-91				
If this production is	commingled	with that	from a	ny other	lease or	pool, give co	ommingling	order numbe	r:	
IV. COMPLETIO	N DATA									
Designate Type of Comp		 _	l Ga	s Well X	New Wel	l Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded: 6-18-90 Date Compl. Ready to Prod.: 8-24-90						·	Total Dep	Total Depth: 30391 P.B.T.D.: 30391		3039'
levations (DF, RKB, RT, GR, etc): Name of Producing Forms 6154 RKB Fruitland Coal					tion:	Top Oil/Gas Pay: Tu		Tubing De	•	
Perforations: 2730-2948'; 2996-3034' Uncemented Predrilled Liner							Depth Cas 5.50	Depth Casing Shoe: 5.50: liner at 3272'; 7" at 3286'		
		TUBI	NG C	ABING	AND	CEMENTING	G RECO	RD	-	
HOLE SIZE		CASING & TUBING SIZE				DEPTH SE	DEPTH SET SACKS CEMENT			
· 12.25#		9.625"				307'		295 cf Class B		
8.75"		7.000"				2740'		677 cf 65/35 POZ/148 cf Class B		
6.25"		5.500" (iner				2630 - 3037'		Uncemented		
	2.875"					2932				
V. TEST DATA	(Test ma	/	er reco	overy of	total vo	, lume of load o	oil and mus	t be equili	toler Ocean	copie l (quable
Date First New Oil Run	 -	Date of Test:				Producing Method: (Flow, pump, gas, lift, etc) 007241990				
Length of Test:	Tubing Pressure:				Casing Pressure: Shoke Size:					
Actual Prod. Test:	tual Prod. Test: Oil-					Water - Bbls.:			Gas-ACSUST. 3	
GAS WELL To be t	ested; con	mpletion g	auges:	12,700	MCFD (mis	st 2" pitot);	800 BPDW			
Actual Brod. Test - MC 12,700 MCFD (s	Length of Test: 1 Wr.				Bbls. Condensate/MMCF N/A		: Gravity	Gravity of Condensate:		
Testing Method: Completion Gauge	Tubing Pressure: (shut-in) 1300 psig				Casing Pressure: (shut-in) 1400 psi		Choke Si	Choke Size: 2" pitot		
VI. OPERATOR	CERTIF	ICATE	OF C	OMPL	LANCE	<u> </u>	OII	CONSE	RVATION	DIVIBION
I hereby certify that the rules and regulations of the Oil Co Division have been complied with and that the information g is true and complete to the best of my knowledge and belief					iven above	Date Approved 007 2 9 1990 By				
Signature Title: Administrative	Manager	Date:	10/2	5/90			1191	LIDEBVISO	A DISTRIC	T #3
Telephone No.: (303)	247-0728		•	/			l ^s	Ois Ett Alge		

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

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