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| LAND OFFICE | <u> </u> | | |
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| PRORATION OF | | l | |

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65

| FILE | | 10 | → | | | AND | | | _ | |
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| TRANSPORTER | GAS | / - | - | | | | | | | |
| OPERATOR | | 3 | 1 | | | | | | | |
| PRORATION OF | ICE | | | | | | | | | |
| Operator | K TMBET | T. OTI | COMPANY | | | | | | | |
| | | | OOMANI | | | | | | | |
| Address | P.O. B | OX 10 | 97 FARMI | NGTON, | NEW MEXICO | 0 | | | | |
| Reason(s) for filing | (Check pr | oper box | () | | | 0 | ther (Please | explain) | | |
| New Well | | | | in Transp | orter of: | | | | | |
| Recompletion | | | Oil | | Dry Gas | | | | | |
| Change in Ownershi | P | | | head Gas | Conden | | | | | |
| If change of owners | ship give | name ner | | | or operator te 4-1-73 | r irom f | imbell, | inc. to | Kimbell Oil | Company. |
| DESCRIPTION O | i taw ar | I. AND | LEASE | | | | | <u></u> | | |
| Lease Name Lease Name | <u>)r werd</u> 1 A | <u> </u> | Well N | lo. Pool N | ame, Including Fo | | | Kind of Lease | Fee | Lease No. |
| recera | L A. | | 3 | | Basin Dake | ota | | State, Federal | or see 1.60. | 079 079 -A |
| Location M | | , 79 |)O Feet | From The_ | S Lin | e and | 790 | _ Feet From T | he | |
| | 35 | | | 25N | _ | 6W | NI (D) (| Rio A | lrriba | County |
| Line of Section | | To | ownship | | Range | | , NMPM, | | | |
| DESIGNATION (| \E TDA | NSPOR | TER OF O | IL AND | NATURAL GA | \s | | | | |
| Name of Authorized | Transpor | ter of O | | r Condenso | rte 🔯 | Address [0 | | | ed copy of this for | m is to be sent) |
| Plateau L | nc. | | | | | ROX 10 | 8 Farmir | gton, Ner | Mexico | m is to be centl |
| Name of Authorized | | | | or | Dry Gas | ! | | | ed copy of this for | m is to be sem, |
| El Paso Na | atural | Gas | | | TP | | ally connecte | gton, New | | |
| If well produces oil | or liquid | 5, | Unit M | 35 | 7wp. Rge. 6 | is gus dett | | 1 | 4-23-63 | |
| give location of tar | | | <u> </u> | | | <u> </u> | | number: | | |
| If this production | | ngled w | vith that from | any othe | r lease or pool, | give commi | inging order | | | |
| COMPLETION I | | | · (V) | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back Sar | ne Res'v. Diff. Res |
| Designate Ty | rpe of C | omplet | ion – (X) | l 1 | | 1 | <u> </u> | 1 | | |
| Date Spudded | | | Date Comp | ol. Ready to | o Prod. | Total Dep | th | | P.B.T.D. | |
| | | | | | | Top Oil/G | as Pay | | Tubing Depth | |
| Elevations (DF, RI | KB, RT , G | R, etc.) | Name of P | roducing F | ormation | Top On/G | ds Fdy | | | |
| Perforations | | | | | | | | | Depth Casing Sh | 10 e |
| Periorations | | | | | | | | | | |
| | | | | TUBIN | G, CASING, AN | D CEMENT | ING RECOR | D | T | |
| HOL | ESIZE | | CAS | ING & TL | BING SIZE | | DEPTH S | ET | SACK | S CEMENT |
| | | | | | | | | | - | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | VD DEO | TITET | FOR ALLO | WARLE | (Test must be | after recover | y of total volu | ime of load oil | and must be equal | to or exceed top all |
| TEST DATA A! | ID KEQ | UESI | FUR ALLO | WADEE | able for this d | lepth or be fo | r full 24 hour | 8) | | |
| Date First New Oi | l Run To | Tanks | Date of T | est | | Producing | Method (Flot | w, pump, gas li | it, etc.) | |
| | | | | | | Casing P | | | Choke Size | |
| Length of Test | | | Tubing P | essure | | Casing P | 149944 | | | |
| | - M | | Oil-Bbls | | | Water - Bb | ola. | | Gas - MOF | 27 19/3 |
| Actual Prod. Duris | 7d Lest | | 022.3 | • | | | | | | 604 |
| | | | | | | | | | OIL | ON. COM. |
| GAS WELL | | | | | | | | | ~ | IST. 3 |
| Actual Prod. Tes | -MCF/D | | Length of | Test | | Bbls. Co | ndensate/MMC | F | Gravity of Con | iensate |
| | | | | | | | ê mb | | Choke Size | |
| Testing Method (| itot, back | ; pr.) | Tubing P | ressure (S | hut-in } | Casing P | ressure (Shu | C-211) | Chicke State | |
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| I hereby certify Commission hav | | | a with son i | rnet ine i | HIOLINGETON ETAGE | 50 1E | Ontaine | Signed 1 | y Emery C. | Arnold |
| above is true as | nd compl | ete to | the best of | my knowl | edge and belief | . 3 | | CHILLIA . | VISOR DIST. | #3 |
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Separate Forms C-104 must be filed for each pool in multiply completed wells.

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NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

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