STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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| DISTRIBUTE | OM | |
| SANTA PE | | |
| FILE | | |
| U.1.a.1. | | |
| LANG OFFICE | | |
| TRANSPORTER | OIL | |
| | GAS | |
| OPERATOR | | |
| PROMATION OFFICE | | |
| | | |

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE AND



| I. | PORT OIL AND NATURAL GAS | |
|--|--|--|
| KIMBELL OIL COMPANY OF TEXAS | | |
| BOX 1097, FARMINGTON, N. M. 87499 | | |
| Reason(s) for filing (Check proper box) | Other (Please explain) | |
| Recompletion Oil Dr | W Gas Bame change of operator. | |
| Change name of open | rator from Sims Oil Company, Inc. pany of Texas - effective 10/1/84 | |
| II. DESCRIPTION OF WELL AND LEASE | | |
| Devonian Fed. Well No. Pool Name, including Formation Fed. Basin Dakota | State, Federal or Fee. No. No. 014375 | |
| Unit Letter K 1850 Feet From The Lin | • andFeet From The | |
| | 2W Sạn Juan County | |
| III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil of Condensate Address (Give address to which approved copy of this form is to be sent) Box 9156, Phoenix, Arizona 85068 | | |
| Name of Authorized Transporter of Casinghedd Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) El Paso Natural Gas Co. Box 1492, El Paso, Texas 79978 | | |
| If well produces oil or liquids, Unit Sec. Twp. Rge. give location of tanks. K 4 29N 12W | Yes 11/11/60 | |
| If this production is commingled with that from any other lease or pool, give commingling order number: | | |
| NOTE: Complete Parts IV and V on reverse side if necessary. | | |
| VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION | | |
| I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief. | APPROVED 007 23 1984 . 19 | |
| | TITLE SUPERVISOR DISTRICT # 3 | |
| A Dement | This form is to be filed in compliance with RULE 1104. | |
| E. A. Clement, Agent | If this is a request for allowable (or a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. | |
| (Title) 10/15/84 | All sections of this form must be filled out completely for allowable on new and recompleted wells. | |
| (Date) | Fill out only Sections I. II. III, and VI for changes of owner, well name or number, or transporter, or other such change of condition. | |
| | Separate Forms C-104 must be filed for each pool in multiply completed wells. | |