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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

I. Operator **KIMBARK EXPLORATION COMPANY**
Address **201 UNIVERSITY BLVD., DENVER, COLORADO**
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
If change of ownership give name and address of previous owner **GAS PRODUCERS CORPORATION, 2300 FIRST NATIONAL BANK BLDG., DALLAS, TEXAS**

II. DESCRIPTION OF WELL AND LEASE
Lease Name **HORTON** Well No. **2** Pool Name, Including Formation **BLANCO-MESAVERDE** Kind of Lease
State, Federal or Fee **FEDERAL**
Location
Unit Letter **A** **990** Feet From The **N** Line and **990** Feet From The **E**
Line of Section **22** Township **32N** Range **11W** NMPM, **SAN JUAN** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☐ or Condensate ☒
SOUTHERN UNION GAS GATHERING CO. Address (Give address to which approved copy of this form is to be sent)
FIDELITY UNION TOWER, DALLAS, TEXAS
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒
SOUTHERN UNION GAS GATHERING CO. Address (Give address to which approved copy of this form is to be sent)
FIDELITY UNION TOWER, DALLAS, TEXAS
If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rge. Is gas actually connected? When
YES

If this production is commingled with that from any other lease or pool, give commingling order number:
IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X						
Date Spudded 9-11-52	Date Compl. Ready to Prod. 11-1-52	Total Depth 5660	P.B.T.D.					
Pool BLANCO	Name of Producing Formation MESAVERDE	Top Oil/Gas Pay	Tubing Depth					
Perforations		Depth Casing Shoe						

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
13 3/8	9 5/8	202	175
8 3/4	5 1/2	4788	200
4 3/4 - T.D.			

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

VI. CERTIFICATE OF COMPLIANCE
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.
W. K. ARBUCKLE, PRESIDENT
JANUARY 10, 1966
OIL CONSERVATION COMMISSION
APPROVED **JAN 11 1966**
BY **Original Signed E. C. Arnold**
TITLE
This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for 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.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out Sections I, II, III, and VI only 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.