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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

Santa Fe, New Mexico 87504-2088

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

DISTRICT II P.O. Drawer DD, Anesia, NM 88210

			CRODE OF							
Operator	TO	IHAN:	SPORT OIL	AND NA	I UHAL GA		PI No			
յթւատ Kimbark Oil & Gas Com		Weil API No. 300452195500SI								
Address						3004.				
1660 Lincoln Street,	#2700, Dei	nver,	Co 80264							
Reason(s) for Filing (Check proper box				X Oth	er (Please expla	iin)				
New Woll	Cha		ansporter of:	Effe	ctive Da	te: 7-16	5-91			
Recompletion	Oil	/ 	ry Gas	11116	.cerve Da	. /-II	, <u>, , ,</u>			
Change in Operator XX	Casinghead Ga	ıs 🗌 Co	ondensate		·····					
, , ,	llador Peti		Company	1660 Lir	coln St.	, #2700	, Denver	, Co 80	0264	
I. DESCRIPTION OF WEL			1.11				<u> </u>	·		
Lease Name	Well No. Pool Name, Incl			L Crota F			Lease Lease No.			
Horton	lA Blanco			saverde				SF0780	JYDA	
Location Unit LetterG	: 1850	Fo	est From The N	orth Lin	e and 1690	Fe	et From The	East	Line	
Section 7 Town	ship 31N	R	ange 11W	, N	мрм, Sa	n Juan		·	County	
II. DESIGNATION OF TRA	NSPORTER (OF OIL	AND NATU	RAL GAS						
Name of Authorized Transporter of Oil	Address (Give address to which approved copy of this form is to be sent)									
Giant Refining Co.		e XX	Farmington, NM							
Name of Authorized Transporter of Ca.	Address (Give address to which approved copy of this form is to be sent)									
Sunterra Gas Gatherin	PO Box 26400, Albuquerque, NM. 87125									
If well produces oil or liquids, give location of tanks.	Unit Sec	-	wp. Rge.		y connected?	When				
·	G G		SIN 11W	Yes	hae	1970	0			
f this production is commingled with the V. COMPLETION DATA	ial from any other le	aise or poo	or, give comming	ang otder num	oer:					
Com difficulty of the	lo	il Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completic				1						
Date Spudded	Date Compl. R	Date Compl. Ready to Prod.			Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	iation	Top Oil/Gas Pay			Tubing Depth					
							<u></u>	Ch.		
Perforations					Depth Casing Shoe					
	eri i r	INC O	A CINIC AND	CEMENT	NC DECOR	D	1			
ווסו כ פוזכ				CEMENTING RECORD DEPTH SET			SACKS CEMENT			
HOLE SIZE	CASIN	CASING & TUBING SIZE			DEF IN SET			SAUTO OLIVICIAI		
										
Y. TEST DATA AND REQU										
OIL WELL (Test must be aft	er recovery of total							for full 24 how	urs.)	
Date First New Oil Run To Tank Date of Test				Producing Method (Flow, pump, gas lift, etc.)						
		····		1				(1) year 20 v-		
Length of Test	Tubing Pressur	ге		Casing Press	ure		100 × 121	GEIT	I FIN	
Actual Dead During Tree				Water - Bbl	·		A - MCF			
Actual Prod. During Test	Oil - Bbls.	Oil - Bbis.			Water - Bois.			L1 8 199	11	
C. O. W.				1			<u> </u>	L1 0 133		
GAS WELL Actual Prod. Test - MCF/D	Length of Test	··-·		Dhis Cond	nunta/\$4\$4/212	······································	OIL	EQN.	DIV.	
Actual Flott 1881 - MCF/D	Length of Test	ı		Bois. Condo	Bbls. Condensate/MMCF					
Testing Method (pitot, back pr.)	Tubing Pressu	Tubing Pressure (Shut-in)			sure (Shut-in)		Choke Size			
						•				
VI. OPERATOR CERTIF	ICATE OF C	'OMPI	JANCE					<u> </u>		
I hereby certify that the rules and n					OIL COI	NSERV	ATION	DIVISIO	NC	
Division have been complied with	and that the informa	tion given					1111 7	1001		
is true and complete to the best of	my knowledge and t	belief.		Dat	e Approve	ed	JUL 18	1331		
11/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1	-				pp.046			1		
WINT CVV		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		∥ Rv		3.	1) E	Ham!		
Signaluté / Victor P. Stabio President					SUPERVISOR DISTRICT #3					
Printed Name			l'itle	Title	`	SUPE	RVISOR	DISTRICT	73	
7/16/91	(303) 839	<u>-5504</u>		11	J					
Date			hone No.							

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 filed for each pool in multiply completed wells.