

NO. OF COPIES RECEIVED		4
DISTRIBUTION		
SANTA FE		
FILE		
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)		Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of <input type="checkbox"/>	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>

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. 4	Pool Name, Including Formation BLANCO MESAVERDE	Kind of Lease State, Federal or Fee FEDERAL
Location			
Unit Letter M	990 Feet From The SOUTH Line and 990 Feet From The WEST		
Line of Section 27	Township 32N	Range 12W	NMPM, SAN JUAN County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
SOUTHERN UNION GAS GATHERING CO.	FIDELITY UNION TOWER, DALLAS, TEXAS		
If well produces oil or liquids, give location of tanks.	Unit	Sec. NONE	Twp. Rge. Is gas actually connected? YES When APRIL 1954 (APPROX.)

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'tv. Diff. Res'tv.
Date Spudded JAN. 28, 1953	Date Compl. Ready to Prod. OCT. 31, 1953	Total Depth 5160'	P.B.T.D. SAME				
Pool BLANCO	Name of Producing Formation MESAVERDE	Top Oil/Gas Pay 4680'	Tubing Depth 5100'				
Perforations 5" SLOTTED LINER 4680' TO 5158'			Depth Casing Shoe LINER SHOE 5158'				
TUBING, CASING, AND CEMENTING RECORD							
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT		
12 1/4"	10 3/4"	32#	200'		150		
9"	7"	23#	4680'		175		
6 1/4"	5"	SLOTTED LINER	5156'		NOT CEMENTED		
	2 3/8"	4.7#	5100'		NOT CEMENTED		

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL **NOT APPLICABLE** (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 **NOT APPLICABLE**

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

(Date)

OIL CONSERVATION COMMISSION

APPROVED **JAN 11 1966**, 19
BY **Original Signed Emery C. Arnold**
Supervisor Dist. # 8
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.