			1
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DISTRIBUTION SANTA FE	, ,	CONSERVATION COMMISSION	Form C+104
FILE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11 Effective 1-1-65
		AND	
U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	. GAS
OIL	ь		
TRANSPORTER GAS			
OPERATOR /			
PRORATION OFFICE			
Operator			
KIMBARK UP	ERATING CO.		
ł	ln Street, Suite 808, Denve	on Colomado 90205	
Reason(s) for filing (Check proper		Other (Please explain)	
New Well	Change in Transporter of:	,,	
Recompletion	Oil Dry Go	ıs 🗔	
Change in Ownership	Casinghead Gas Conder	nsate 🔲	
If change of ownership give named and address of previous owner _	ne		
DESCRIPTION OF WELL A	ND LEASE Well No. Pool Name, Including F	ormation Kind of Lea	ase Lease No.
STOREY	3 We BLANCO		20-20-1101
Location		1010	_
Unit Letter F;			
Line of Section 34	Township 32N Range]]W , NMPM, S	SAN JUAN County
DESIGNATION OF TRANSPORT OF Authorized Transporter of	ORTER OF OIL AND NATURAL GA		roved copy of this form is to be sent)
Name of Authorized Transporter of	or condensate	Addition for the desired to briten app	to the series of this form is to the series
Name of Authorized Transporter of	Casinghead Gas or Dry Gas 🔀	Address (Give address to which app	roved copy of this form is to be sent)
EL PASO NA	TURAL GAS	SAME	AS 1
If well produces oil or liquids,	Unit Sec. Twp. P.ge.		When
give location of tanks.	7 4 1	NO .	SEPTEMBER 1977
If this production is commingled	with that from any other lease or pool,	give commingling order number:	, , , , , , , , , , , , , , , , , , ,
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
Designate Type of Compl		New Well Wolfover Deepen	Flag Back Same Nes 1. Ditt. Nes 1.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
•		726'	726'
1/12/76 Elevations (DF, RKB, RT, GR, etc	1/25/76 Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
6003' K.B.	NACIEMENTO	700'	690'
Perforations	I INCIENCIO	700	Depth Casing Shoe
NONE			710'
	TUBING, CASING, AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	120'	90
7 7/8"	4 1/2"	718'	125
		<u>j. </u>	
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be a	fter recovery of total volume of load o pth or be for full 24 hours)	il and must be equal to or exceed top allow
OIL WELL Date First New Oil Run To Tanks	<u></u>	Producing Method (Flow, pump, gas	lift, etc.
Date First New Oil Run 10 Tunks	200 01 1001	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Length of Test	Tubing Pressure	Casing Pressure	Choke Siz
Fendry or 1 ast		-	- 1071
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Can-RED COM.
			Cas-REP COM.
			OIL DIST. 3
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
1/26/76410	2 hours		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Bk Pr	405	405	2"
CERTIFICATE OF COMPLI	ANCE	OIL CONSERV	ATION COMMISSION
			2 () ()
hereby certify that the rules	and regulations of the Oil Conservation	APPROVED	,
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		By Original Signed by A. R. Kendrick	
		SUPERVISOR DIST 42	
		TITLE	~ モルエ・ 奈辺
WK luk	ille		n compliance with RULE 1104.
wir uwa	rui -	If this is a request for all	lowable for a newly drilled or deepened

Walter K. Arbuckle (Signature)

President

8/31/77 (Date)

(Title)

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 only Sections I. II. III. and VI for changes of owner, well name or number, or transporter, or other such change of condition.