## PROPATION OFFICE

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

## REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Kimbark Oil & G	as Company		
Address		. co 80203	
	reet, Suite 1000, Denver	Other (Please explain	)
Reason(s) for filing (Check proper box New Well	Change in Transporter of:		•
Recompletion	OII Dry G	Effective	March 5, 1987
Change in Ownership	Casinghead Gas Conde	nsate	
If change of ownership give name			
DESCRIPTION OF WELL AND	LEASE		
Lease Name	Well No. Pool Name, including r	I	E-Jours 1 000701/64
Horton	4 Blanco Mes	sa verde State, I	Tederal or Fee Federal SFU/8140A
Location	90 Feet From The SouthLi	ne and 990 Feet	From The West
Unit Letter M : 3	Peet From The		
Line of Section 27 To	wnship 32N Range	12W , NMPM,	San Juan County
PROCESS ARMON OF TRANSPORT	TER OF OIL AND NATURAL G	AS	
Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which	approved copy of this form is to be sent)
		Address (Cine address to which	approved copy of this form is to be sent)
Name of Authorized Transporter of Ca Sunterra Gas Gather		P.O. Box 26400, Alb	
	Unit Sec. Twp. Rgs.	is gas actually connected?	When
If well produces oil or liquids, give location of tanks.		Yes	1954
If this production is commingled wi	th that from any other lease or pool,		
Designate Type of Completi	on - (X)   Oil Well   Gas Well	New Well Workover Deep	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
			Depth Casing Shoe
Perforations			
•	TUBING, CASING, AN	ID CEMENTING RECORD	CACYS CEMENT
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
TEST DATA AND REQUEST FOIL WELL	OR ALLOWABLE (Test must be able for this c	depth or be for full 24 hours)	ad oil and must be equal to or exceed top allo
Date First New Oil Run To Tanks	Date of Test	Producing Me to France	gas lift, etc.)
Length of Test	Tubing Presews	Casing Pressur	E.W.
		Water-Bbis	Inon Garage
Actual Prod. During Test	Oil-Bbls.	OIL COL	1987
		TOW.	DIV
GAS WELL		<u> </u>	Gravity of Condensate
Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity or Companyate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-is)	Casing Pressure (Shut-in)	Choke Size
CERTIFICATE OF COMPLIAN	ICE	OIL CONSE	RVATION DIVISION 1 0 1007
		APPROVED	JUL 10 1987
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			a. / [())
		. BY	SUPERVISOR DISTRICT #
	$\wedge$	TITLE	Hermor #
/),	/) 1	This form is to be fil	ed in compliance with RULE 1104.
( hustine	Yickait.	[ ]	r allowable for a newly drilled or deepend companied by a tabulation of the deviation
	nature)	tests taken on the well is	accordance with MULE 111.
	Supervisor (ide)	All sections of this f	orm must be filled out completely for allo-
July 7, 1	•	11	It ist and UT for changes of owner
	)aie)	well name or number, or tr	snaporter, or other such change of condities must be filed for each pool in multip
	·•	Separate Forms C-10 completed wells.	A HIGH AS STREET IN ABOUT BOOK IN HIGHER