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LAND OFFICE			
IRANSPORTER	OIL		
	GAS		
OPERATOR		4	
PRORATION OFFICE			

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

	SANTA FE /		OR ALLOWABLE AND	Supersedes Old C-104 and C-110 Effective 1-1-65				
⊢	U.S.G.S.		SPORT OIL AND NATURAL GA	AS .				
F	LAND OFFICE							
	TRANSPORTER GAS /							
	OPERATOR 4							
1.	PRORATION OFFICE Operator							
-	Address P.O. BOX 1097 FARMINGTO:, NEW MEXICO Other (Please explain)							
	Reason(s) for filing (Check proper box) Change in Transporter of:							
	New Well Recompletion	Oil Dry Gas						
L	Change in Ownership XX	Casinghead Gas Condensa		Kimbell Oil Co.				
1	If change of ownership give name and address of previous owner Change name of operator from Kimbell Inc. to Kimbell Oil Co.							
II . 1	DESCRIPTION OF WELL AND L	EASE Well No. Pool Name, Including Form	mation Kind of Lease	Lease No.				
Ī	Lease Name Salazar Federal	well No. Pool Name, Including Form	State, Federal	or Fee Fed. 080136				
	Location		1450 Feet From T	E E				
	Unit Letter J; 14	50 Feet From The S Line	and	o Arriba				
	Line of Section 22 Town	nship 25N Range	6W , NMPM,	County				
	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	Address (Give address to which approv	and come of this form is to be sent)				
111.	Name of Authorized Transporter of Oil	Of Condensate	•					
	Name of Authorized Transporter of Casi	inghead Gas or Dry Gas XX	Address (Give address to which approx					
	El Paso Natural Gas Company		Box 990 Farmington, New Mexico					
	If well produces oil or liquids, give location of tanks.	Unft Sec. Twp. Fige.	yes					
	If this production is commingled with	h that from any other lease or pool, g	ive commingling order number:					
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.				
	Designate Type of Completion	n — (X) Date Compl. Ready to Prod.	Total Depth	P.B.T.D.				
	Date Spudded	Date Compi. Ready to 1104.		Tubing Depth				
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Inplind Debili				
	Perforations			Depth Casing Shoe				
		TUBING, CASING, AND	CEMENTING RECORD					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT				
		OP AT LOWARIE (Test must be of	ter recovery of total volume of load oil	and must be equal to of posed for allow-				
V	7. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Order of Test ORDer of Test OPERATOR OF Test OPERATOR OF TEST OF THE OPERATOR							
	Date First New Oil Run To Tanks Date of Test Producing Method (Fibb., p		<u>_</u>	Choke Size				
	Length of Test	Tubing Pressure	Casing Pressure	MAR 27 1973				
	Actual Prod. During Test	Actual Prod During Test Oil-Bbls. Water-Bbls.		Gas-MCF OIL CON. COM.				
				DIST. 3				
	GAS WELL			Gravity of Condensate				
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate				
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size				
			OU CONSERV	ATION COMMISSION				
V	I. CERTIFICATE OF COMPLIAN	ICE	M	AR 2 7 1973 19				
	I hereby certify that the rules and	regulations of the Oil Conservation	BY Original Signed by Emery C. Arnold					
	Original Signed By John Carathers (Signature) Suppt. (Title) 3-27-73 (Date)							
			TITLESUPERVISOR DIST. #3					
			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 only Sections I. II. III, and VI 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.						

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