## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION			
SANTA FE			
FILE			
U.1.G.2.			
LAND OFFICE			
TRANSPORTER	OIL		
	BAD		
OPERATOR			
PRORATION OFFICE			

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

Separate Forms C-104 must be filed for each pool in multiply

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

4.			
KIMBELL OIL COMPANY OF TEXAS			
Address			
BOX 1097, FARMINGTON, N. N. 87499			
Reason(s) for filing (Check proper box)	Other (Please explain)		
New Weil Change in Transporter of:	NAME CHANGE OF OPERATOR		
	densate		
Change name of	operator from Sims Oil Company, Inc.		
If change of ownership give name and address of previous owner to Kimbell Oil	Company of Texas - effective 10/1/84		
II. DESCRIPTION OF WELL AND LEASE			
Lease Name   Well No.   Pool Name, including Fo	rmatton Kind of Lease SF-080130		
Coral 2 Basin Dakota	State, Federal or Fee		
Location	790 W		
Unit Letter M : 790 Feet From The S	and Feet From The		
Line of Section 27 Township 25N Range	6W NMPM, Rio Arriba County		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	Address (Give address to which approved copy of this form is to be sent)		
Giant Refining Co.	Box 9156, Phoenix, Arizona 85068		
Name of Authorized Transporter of Casingnead Gas or Dry Gas	Address (Give address to which approved copy of this form is to be sent)		
El Paso Natural Gas Co.	Box 1492, El Paso, Texas 79978		
If well produces oil or liquids, Unit Sec. Twp. Age.  give location of tanks. M 27 25N 6W	Yes 2/1/61		
If this production is commingled with that from any other lease or pool, give commingling order number:			
NOTE: Complete Parts IV and V on reverse side if necessary.			
VI. CERTIFICATE OF COMPILANCE OIL CONSERVATION DIVISION			
The shows the pulse and completions of the Oil Consequence Division have	APPROVED OCT 23 1984		
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of	APPROVED		
my knowledge and belief.	BY STAND		
	TITLE SUPERVISOR DISTRICT # 3		
( ) (a) // +			
A (Mamenl	This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or despende		
E. A. Clement, Agent	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.		
10/15/84 (Tule)	All sections of this form must be filled out completely for allowable on new and recompleted wells.		
(Date)	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.		