STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION			1
SANTA FE			†
FILE			1
U.S.G.S.			_
LANG OFFICE		_	
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PROBATION OFFICE			

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL G Operator KIMBELL OIL COMPANY OF TEXAS Address BOX 1097, FARMINGTON, N. M. 87499 Reason(s) for liling (Check proper box) Other (Please explain) New Well Change in Transporter of: Recompletion CII Name change of operator Dry Gas Change in Ownership Casinghead Gas Condensate Change name of operator from Sims Oil Company, Inc. If change of ownership give name to Kimbell Oil Company of Texas - effective 10/1/84 and address of previous owner. II. DESCRIPTION OF WELL AND LEASE Weil No. | Pool Name, Including Formation Lease Name Kind of Lease Liberman 1 Basin Dakota Fed. State, Federal or Fee Location 990 E eet From The Feet From The Township 25N 7W Line of Section Rio Arriba NMPM County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Off or Condensate 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 Casinghead 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 Is gas derually connected? Rqa. If well produces oil or liquids, give location of tanks. P 7W 25N April, 1961 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 COMPLIANCE OIL CONSERVATION DIVIS I hereby certify that the rules and regulations of the Oil Conservation Division have APPROVED been complied with and that the information given is true and complete to the best of my knowledge and belief. SUPERVISOR DISTRICT # 6 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 (Signature well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111, Clement, Agent All sections of this form must be filled out completely for allow-(Title) able on new and recompleted wells. Fill out only Sections I. II. III, and VI for changes of owner, (Date) well name or number, or transporter, or other such change of condition.

completed wells.