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FILE	
U.S.U.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	
Operator	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Kimbark Oil & Gas Company

Address 1580 Lincoln St. #700 Denver, CO 80203

Reason(s) for filing (Check proper box)

New Well ☐ Change in Transporter of:
Oil ☐ Dry Gas ☐
Recompletion ☐ Oil ☐ Condensate ☐
Change in Ownership ☒ (See other) Casinghead Gas ☐

Other (Please explain)

Kimbark Operating Company was absorbed by Kimbark Oil & Gas Company

If change of ownership give name and address of previous owner

Kimbark Operating Company 1580 Lincoln St. #700 Denver, CO 80203

DESCRIPTION OF WELL AND LEASE

Lease Name	Storey	Well No.	1	Pool Name, including Formation	Blance Mesa Verde	Kind of Lease	State, Federal or Fee Federal	Lease No.	SF078051
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Location
Unit Letter L : 1550 Feet From The South Line and 1025 Feet From The West
Line of Section 34 Township 32N Range 11W, NMPM, San Juan County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent)Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Address (Give address to which approved copy of this form is to be sent)
Southern Union Gathering Co. First International Bldg. Dallas, TX 75201

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
					Yes	1950's

If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'
Date Spudded	Date Compl. Ready to Prod.			Total Depth		P.B.T.D.		
Elevations (DF, RKB, RT, CR, etc.,)	Name of Producing Formation			Top Oil/Gas Pay		Tubing Depth		
Perforations						Depth Casing Shoe		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MWCF	Gravity of Condensate
Testing Method (flow, back pr.)	Tubing Pressure (Estat-in)	Casing Pressure (Estat-in)	Choke Size

CERTIFICATE OF COMPLIANCE

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.

Manager of Drilling & Production

3/31/82

OIL CONSERVATION DIVISION

APPROVED APR 9 1982

Original Signed by FRANK T. CHAVEZ

BY SUPERVISOR DISTRICT # 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 deviated tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all wells 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 conditions.