Submit 5 Copies
Appropriate District Office
DISTRICT 1 P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

DISTRICT II P.O. Drawer DD, Antesia, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.	T	O TRA	NSP	ORT OIL	AND NA	TURAL GA						
Operator								Weil API No.				
Kimbark Oil & Gas Company							300452195700S1					
Address	30 D	00		2064								
1660 Lincoln St., #270 Reuson(s) for Filing (Check proper box)	Jo, Denv	er, cc) 00	204	Othe	er (Please expla	ain)					
New Well		Change in	Transpo	nter of:	<u> </u>		,					
Recompletion	Oil Dry Gas Effective Date: 7-16-91											
Change in Operator	Casinghead			sate XX						,		
f change of operator give name	ladar Da				1660 Tin	1 C+	#2700	D	00 00	261		
and address of previous operator <u>Hall</u>	rador Pe	rrorec	ını co	mpany .	LOOU LIN	coln St.	• 1/2/UU	, Denver	, GU 8 U	Z b4		
II. DESCRIPTION OF WELL	AND LEA	SE										
Lease Name		Well No. Pool Name, Including Formation						Kind of Lease No.				
Storey	1A Blanco Mesa				saverde		State,	State, Federal or Fee SF078051A				
Location												
Unit Letter P	_:920		Feet Fr	om The Sc	outh_Line	and <u>1035</u>	Fe	et From The_	East	Line		
24	2017		_			· · · · · ·	_			C		
Section 34 Townshi	p 32N		Range	<u> 11W</u>	, NI	MPM, Sai	n Juan_			County		
III. DESIGNATION OF TRAN	CDODTEE	ን ለፍ ለ፤	II AN	D NATII	DAT CAS							
Name of Authorized Transporter of Oil		or Conden				e address to wh	hich approved	copy of this fo	orm is to be see	nt)		
Giant Refining						Farmington, New Mexico						
Name of Authorized Transporter of Casinghead Gas or Dry Gas XX						Address (Give address to which approved copy of this form is to be sent)						
Sunterra Gas Gathering	-			WALL!				que, NM 87125				
If well produces oil or liquids,	Sec. Twp. Rge.			1			<u>.</u> .					
give location of tanks.	P	34	32N	11W	Yes		L:	1976				
If this production is commingled with that	from any othe	r lease or	pool, giv	ve comming!	ing order numl	ber;						
IV. COMPLETION DATA												
		Oil Well		Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v		
Designate Type of Completion		1]	L	1	<u> </u>	<u> </u>			
Date Spudded	Date Compl. Ready to Prod.				Total Depth			P.B.T.D.				
CLUST AND DATE OF CO.					Top Oil/Gas Pay							
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					-up our our aj			Tubing Depth				
Perforations					<u> </u>			Depth Casin	g Shoe			
								1-1,	0			
	T	LIBING	CASI	NG AND	CEMENTI	NG RECOR	RD.					
HOLE SIZE CASING & TUBING SIZE					DEPTH SET				SACKS CEME	ENT		
			::: :=									
V. TEST DATA AND REQUE												
OIL WELL (Test must be after	Date of Tes		of load	oil and must					for full 24 hou	rs.)		
Date First New Oil Run To Tank		Producing Method (Flow, pump, gas lift, etc.)										
T III 6 TP A					Caring Fees	2 5 1 W	1 5 In	Choke Size	- 12 18 18 18 18 18 18 18 18 18 18 18 18 18			
Length of Test	Tubing Pres	ssure			Migares	BAC 0880 05 25	-	1016	- (1) - 1) - 1) - 1) - 1) - 1) - 1) - 1)	1. 6. 55		
Actual Prod. During Test	Oil - Bbls.				Water - Block	L1 8 1991	1	Gas- MCF	/ Line 1	0 - 0 - 25 - 29 - 4		
Actual Front During For			30	LT 0 1331	i .	JUNA 3 1991						
GAO IVELI		······································			OIL	CON. [NV	r,***	131 14410	V PART		
GAS WELL	AS WELL ual Prod. Test - MCF/D Length of Test				Bbls. Conde B SMM G			Crowity of	OIL CON. DIV.			
Actual Prod. Test - MCP/D					Bois. Conad	MAGNATOR.		Glavity of C	STORIGE ST	. F		
Festing Method (pitot, back pr.)	sure (Shut-in)			Casing Pressure (Shut-in)		··········	Choke Size					
Tubing Pressure (Shut-in)					Carrie (carrier tar)							
VI OPERATOR GENEVERO	ATE OF		N Y A N		-\							
VI. OPERATOR CERTIFIC				NCE			VSERV	'ATION	DIVISIO	NC		
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above					OIL CONSERVATION DIVISION							
is true and complete to the best of my knowledge and belief.					JUL /8 1991							
11/1/11					Date	Date Approved						
1/1/1/1/1/1/1/1/							7.	۲۱, €	1/2m/			
Signylure					∥ By_							
Victor P. Stabio President							SUPE	RVISOR	DISTRICT	f 3		
Printed Name	(202)	000 ==	Title		Title							
6/7/91 Date	(303)		04 ephone	No.								
			1		- 11							

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.

 4) Separate Form C-104 must be filed for each pool in multiply completed wells.