				
HO OF COPIES REC	9			
DISTRIBUTIO				
SANTA FE	/			
FILE				
U.S.G.S.				
LAND OFFICE				
IRANSPORTER	OIL			
INANSPORTER	GAS			
OPERATOR	6			
PRORATION OF				
Operator				

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

	SANTA FE	-/-	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65		
	U.S.G.S.	-+-	ALITHORIZATION TO TO	AND			
	LAND OFFICE		AUTHORIZATION TO TRA	INSPORT OIL AND NATURAL	GAS		
	I RANSPORTER OIL						
	GAS	7			API 30-045-22935		
	OPERATOR	6]				
ı.	PRORATION OFFICE		<u> </u>				
	1 -	tina	r _o				
	Kimbark Operating Co.						
	1860 Lincoln Street, Suite 808, Denver, Colorado 80295						
	Reason(s) for filing (Check pr			Other (Please explain)			
	New Well Change in Transporter of:						
	Recompletion		Oil Dry Ga	s 🔲			
	Change in Ownership		Casinghead Gas Conder	nsate			
	If change of ownership give	name					
	and address of previous own						
TZ	DESCRIPTION OF WELL	AND	LEASE				
	Lease Name	3 11112	Well No. Pool Name, Including F	ormation Kind of Lea	82-078147 A No.		
Horton 10 Blanco - Pictured Clif State, Federal or Fee Fed SF					ral or Fee Fed SF-078147A		
Location							
	Unit Letter H	182	O Feet From The North Lin	e and 1120 Feet From	The East		
	Line of Section 13	_	waship 32N Range	12W , NMPM,	San Juan		
	Line of Section 13	Tov	wnship 32N Range	IZW , NMPM,	San Juan County		
117	DESIGNATION OF TRAN	SPOR'	TER OF OIL AND NATURAL GA	s			
***.		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 Transport	er of Car	singhead Gas or Dry Gas	Address (Give address to which appr	oved copy of this form is to be sent)		
	El Paso Natur	al Ga	s Co.	PO Box 1492, El Paso, TX 79999			
	If well produces oil or liquids		Unit Sec. Twp. Rge.		/hen		
	give location of tanks.		H 13 32N 12W	No No	12/14/78		
		gled wi	th that from any other lease or pool,	give commingling order number:			
1 V .	COMPLETION DATA	 	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
	Designate Type of Co	mpletio	on - (X)	X			
	Date Spudded		Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	5/30/78		7/13/78	3150'	3186'		
	Elevations (DF, RKB, RT, GR	R, etc.j	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	6480¹ KB		Blanco - Pictured Clif	2958'	3020 Depth Casing Shoe		
	Perforations 2059_2067! • 2	0063 .	020'; 3042-3057'		3147'		
	2930-2907 , 3	000-3		CEMENTING RECORD			
	HOLE SIZE		CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	12 1/4"		8 5/7"	137'	150 sxs		
	7 7/8"		4 1/2"	3147'	500 sxs		
V.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top able for this depth or be for full 24 hours)						
	Date First New Oil Run To To	ank s	Date of Test	Producing Method (Flow, pump, gas lift, etc.)			
					A STATE OF THE STA		
	Length of Test		Tubing Pressure	Casing Pressure	Choke Size		
			0.00	Water-Bbls.	Gas-M&F		
	Actual Prod. During Test		Oil-Bbls.	Water - Bbis.	DEC 14 978		
	GAS WELL				OIL CON. JOH.		
	Actual Prod. Test-MCF/D		Length of Test	Bbls. Condensate/MMCF	Gravity of Condend 1. 3		
	7/13/78		24 hour Tubing Pressure (Shut-in)				
	Testing Method (pitot, back p	r.)	1	Casing Pressure (Shut-in)	Choke Size		
	pitot		1100#	1100#	1 2"		
VI.	CERTIFICATE OF COM	PLIAN	CE	11	ATION COMMISSION		
				APPROVED, 19,			
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief. W. K. Arbuckle (Signature) President (Title)			with and that the information given	Original Signed by A. R. Kendrick			
			e best of my knowledge and belief.	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 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.			
			/ •				
			·				
			ature)				
			sident				
			tle)				
12/12/78 (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			
		ושו	/	II .			