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U.S.G.S.			
LAND OFFICE			
THANSPORTER	OIL		
	GAS	/	
OPERATOR		2	
PRORATION OFFICE			L

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

LAND OFFICE						
THANSPORTER GAS /						
OPERATOR 2						
PHORATION OFFICE					<del></del>	
Operator Kimbark	Operating Co.	,				
Address	coln Street, Suite 808,	Denver Colora	do 80295			
Reason(s) for filing (Check proper box)		Other (Please				
New Well	Change in Transporter of:					
Recompletion	Oil Dry Gas	75			1	
Change in Ownership	Casinghead Gas Condens	sate		-		
If change of ownership give name and address of previous owner						
DESCRIPTION OF WELL AND I	EASE		Kind of Lease		Lease No.	
Lease Name Horton	Well No. Pool Name, Including Fo		State, Federal	or Fee	SF078147A	
Location	3-A Didico-fiesa	rerae	<u> </u>			
	Feet From The N Line	and 790	Feet From Th	neW		
13	32N 1	I 2W NMPN	, San Jua	n	County	
Line of Section Tow	mship Range	, Idwir is				
DESIGNATION OF TRANSPORT	or Condensate	Address (Give address	to which approve	ed copy of this form is	to be sent)	
Name of Authorized Transporter of Cas		Address (Give address			to be sent)	
El Paso Natural Gas Co	Unit Sec. Twp. Pge.	PO Box 1492, E		<u> 7999                                  </u>		
If well produces oil or liquids, give location of tanks.	E 13 32N 12W	yes		6/28/79		
If this production is commingled wit	h that from any other lease or pool,	give commingling orde	r number:			
COMPLETION DATA	Oil Well Gas Well	New Well Workover	Deepen	Plug Back   Same Re	s'v. Diff. Res'v.	
Designate Type of Completion		X		1		
Date Spudded 3/28/79	Date Compl. Ready to Prod. 5/1/79	Total Depth 5505'		P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay 5162'		Tubing Depth 5143		
6344' KB	Mesaverde	<del>                                      </del>		Depth Casing Shoe		
Perforations 5162-67'; 5169-	-71'; 5174-95'; 5210 <b>-</b> 17' 86-5300'; 5316-24'; 5333	_38!		5500'		
3/.03=3/.74 ; 3/.	TUBING, CASING, AND	CEMENTING RECO		SACKS CE	MENT	
HOLE SIZE	CASING & TUBING SIZE	219'	ET	190 sxs	IMEN!	
13 3/4" 8 3/4"	9 5/8"	3105'		350 sxs		
0 3/4	Stage Collar	1885'		450 sxs		
6 1/4"	4 1/2"	5500 l		363 sxs		
TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a able for this de	epth or be for full 24 hou	r#)		exceed top allow-	
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flo	nu, pump, gas lif	t, etc.)		
	Tubing Pressure	Casing Pressure		Choke Size		
Length of Test	I dbing Piesswe			Gas - MCF		
Actual Prod. During Test	Oil-Bble.	Water - Bbls.		Gal-MCF	e sa	
GAS WELL		Bbls. Condensate/MM	CF.	Gravity of Condense		
Actual Prod. Test-MCF/D	Length of Test		o.			
3185 Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Sh	rt-in)	Choke Size		
Pitot	702"	97.5#		3/4"		
. CERTIFICATE OF COMPLIAN	CE	OIL	CONSERVA	TION COMMISS	ON	
and the second	A start of the Oil Conservation	APPROVED			_, 19	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given commission have been complete to the best of my knowledge and belief.  By Original Signal Signa		<u> </u>				
above in true and complete to the best of my knowledge and the second of the best of my knowledge and my knowledge and the best of m						
Kimbark Operating Co.					LE 1104.	
who the whent	This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviation.				illed or deepened	
	nature)		well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.			
W. K. Arbuckle President		All sections of this form must be filled out completely for allowable on new and recompleted wells.				
	itle)	able on new and	recompleted w	elis. I III and VI for C	hanges of owner.	
June 29, 1979	)ate)	well name or num	ber, or transpor	ter, or other such ch	ange of condition.	