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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

• Operator		/ 111/11		012	71110 11711			API No.			
Kimbark Oil & Gas Com	ıpany					·	30	045233950	0S1		
Address			_								
1660 Lincoln St., #27 Reason(s) for Filing (Check proper box)	00, Denve	r, CO	802	64	Othe	r (Please explo	ain)				
New Well	Cì	nange in T	Fransporte	er of:	1	fective :		-16-91			
Recompletion	Oil		Dry Gas		71.1	LUCLIVE .	race. /	10-71			
Change in Operator	Casinghead C		Condensa	ite 🗌							
f change of operator give name and address of previous operator Hall	lador Pet	roleu	m Com	pany 1	660 Lino	oln St.	, #2700	, Denver,	CO 80	264	
I. DESCRIPTION OF WELL											
Lease Name	Name		Well No. Pool Name, Including					Kind of Lease Lease State Federal or Fee			
Horton		11	Bla	nco Pi	ctured (Cliffs			S F-0	78146A	
Location	. 880		F F	77 N	lorth I:		Λ τ	Feet From The	Wost	Line	
Unit Letter D	:000_		rect Prof	n the	OF LIT LINE	and 113	V r	ect riont the	_WESL	Line	
Section 27 Towns	hip 32N		Range	12W_	, NN	ирм, Sa	n Juan			County	
III. DESIGNATION OF TRA				NATU	RAL GAS	a address to	high annsan	ed copy of this for	rm is to be see	nt)	
Name of Authorized Transporter of Oil	oi	r Condens	iate [Address (Giv.	e acciress to w	nich approve	a copy of this for	M IS to be set	,	
Name of Authorized Transporter of Casi	inchead Gas	[<u>)</u>	or Dry G	las —	Address (Giv.	e address to w	hich approve	ed copy of this for	rın is to be sei	nt)	
El Paso Natural Gas		L	J. Diy U		1			TX 7997		•	
If well produces oil or liquids,					Is gas actually			When?			
give location of tanks.	_ii	i		Rge.							
f this production is commingled with the	at from any other	lease or p	xool, give	commingl	ing order numl	ber:					
IV. COMPLETION DATA	······································				,					hier n	
Designate Type of Completio		Oil Well	G	as Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Compl.	Ready to	Prod.		Total Depth	1		P.B.T.D.		<u> </u>	
Date abunded	Date Compt.	.ceauy 10						1.0.1.0.			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas	Top Oil/Gas Pay			Tubing Depth		
Perforations								Depth Casing	g Shoe		
			<u> </u>	10	OE) (E)	NO DECO	2.0			<u>.</u>	
TUBING, CASING A					DEPTH SET			9	SACKS CEMENT		
HOLE SIZE	CASI	CASING & TUBING SIZE				DEF IN SET			DAGNO GEMENT		
V. TEST DATA AND REQU	EST FOR AL	LOW	ABLE								
OIL WELL (Test must be after		il volume	of load o	il and musi	be equal to or	exceed top al	llowable for	this depth or be f	or Juli 24 hou	rs.)	
Date First New Oil Run To Tank	Date of Test			č ²	1	ethod (Flow, p	oump, gas iyi	ι, εις.)			
Length of Test	Tubing Press	aine			Casing Press		* 11	Choke Size	K (A K	1 (y 10	
Longue Of Foot	raoing riess	R 310			M				le w K	₩ W W.	
Actual Prod. During Test	Oil - Bbls.			423	Water-Bois	£ 8 1991.		Gas MCF	1111	1001	
					A	<u> </u>	75 2		JUNI 3	1991	
GAS WELL					OIL C	UN. D	W		1 008	1 1410	
Actual Prod. Test - MCF/D					Bbls. Colls MacF			Gravity of Condensate DIST. 3			
	Marin San Agent								ופוע	. 3	
Testing Method (pitot, back pr.) Tubing Pressure (Shut-in)					Casing Press	sure (Shut-in)		Choke Size			
					-\					· 	
VI. OPERATOR CERTIF				ICE			NSER'	VATION	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									,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	- · ·	
is true and complete to the pest of my knowledge and belief.						0 100-00-	od	JUL 1 8	1991		
1/11/	>				Dat	e Approv	eu				
MAN / Jan					D.		~		1) 1	•	
Signature D. Chalde	-	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			∭ By₋		<i>_</i>	~ -	leany		
<u>Victor P. Stabio</u> Printed Name	Pre	esiden	Title		Title	2	SUP	ERVISOR D	STRICT	13	
6/7/91	(303	3) 839		, +		J					
Date			lephone 1								
							CONTRACTOR OF STREET	الخيشة بالمستبية فالشور وجوان يرمه	THE RESERVE THE PARTY.		

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 pxol in multiply completed wells.