| <u> </u> | - | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|------------------------------|---------------|-----------------------------------|---------------|--|
| SO. OF COPIES RECEIVED | _ | | | Form C-103 | 4 | |
| DISTRIBUTION | | | | Supersedes Old C+102 and C+103 | | |
| SANTA FE NEW MEXICO OIL CONSERVATION COMMISSION | | | N | Effective 1-1-65 | | |
| FILE | | | | | | |
| U.S.G.S. | | | 5 | a. Indicate Type of I | ease | |
| LAND OFFICE | | | | State X | Fee | |
| OPERATOR | | | | . State Oil & Gas Le | ≥ase No. | |
| | | | | L-6800-4 | | |
| SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.) | | | | | | |
| 1. OIL X GAS WELL | OTHER. | | 7 | . Unit Agreement Na | ime | |
| 2. Name of Operator | | | | B. Farm or Lease Name | | |
| Kimbark Oil & Gas Company | | | | New Mexico 1 | -4 State Comm | |
| 3. Address of Operator | | | | 9. Well No. | | |
| 1580 Lincoln Street, #700, Denver, CO 80203 | | | | 1 | | |
| 4. Location of Well | | | | 10. Field and Pool, or Wildcat | | |
| UNIT LETTERN | 3350 FEET FROM THE | outh 2310 | _ FEET FROM | Fownsend Deve | onian | |
| ······································ | | | N | <u>IIIIIIIII</u> | | |
| THE West LINE, SEC. | | <u>165</u> RANGE <u>35E</u> | NMPM. N | | | |
| | | | | | | |
| 15. Elevation (Show whether DF, RT, GR, etc.) | | | | 2. County | | |
| | GL 4021; 4 | 037' КВ | | Lea | | |
| 16. Check | Appropriate Box To In | dicate Nature of Notice, Rep | port or Other | . Data | | |
| | INTENTION TO: | | BSEQUENT F | | | |
| | | | | | | |
| PERFORM REMEDIAL WORK | PLUG AND ABA | NDON REMEDIAL WORK | X | ALTERING C | | |
| TEMPORARILY ABANDON | | COMMENCE DRILLING OPNS | · [] | PLUG AND # | BANDONMENT | |
| PULL OR ALTER CASING | CHANGE PLANS | CASING TEST AND CEMENT | apt | 1 | | |
| | | OTHER | arily Abai | idon | X | |
| OTHER | | | | | | |
| | | <u>I</u> | | | <u>.</u> | |

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

MI & RU Monument Well Service 3/6/84. TOH w/rods, tbg & pump. Set $5\frac{1}{2}$ " CIBP at 13,175. Set one sack cement on top. Pressure test CIBP to 2500# for 30 minutes w/30,000#. TIH w/2 7/8" tbg & pkr. Set pkr at 13,166. Pressure up annulus to 500#. RU Halco. Acidize perfs 13,100 to 13,154 w/10,000 gal 15% CRA acid. RU Swabbing Unit. Swabbed well until cleaned up. TIH w/production tubing, rods and pump. Put well back on production 3/20/84.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

Mansen

Uperations Manager

DATE

DATE A

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE ____