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	GAS	
OPERATOR		
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

I.

Operator KING RESOURCES COMPANY	
Address 300 Wall Towers West, Midland, Texas 79701	
Reason(s) for filing (check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Kino Sabe	Well No. 1	Pool Name, including Formation South Buffalo-Pennsylvanian	Kind of Lease Fee	Lease No.
Location Wildcat-Holcamp				
Unit Letter J	Feet From The 1950	Line and South	Feet From The 1950	East
Line of Section 16	Township 19-S	Range 33-E	County Lea	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
The Permian Corporation	P. O. Box 3119, Midland, Texas 79701					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
NA	NA					
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 16	Twp. 19S	Rge. 33E	Is gas actually collected? NA	When NA

If this production is commingled with that from any other lease or pool, give commingling order number: **NA**

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 11-29-69	Date Compl. Ready to Prod. 6-3-70		Total Depth 14,700'		P.B.T.D. 11,400' KB			
Elevations (DF, RKB, RT, GR, etc.) 3648' GR	Name of Producing Formation Holcamp		Top Oil/Gas Pay 11,255'		Tubing Depth 11,210'			
Perforations 11,307-11,339' 12 1/2" holes; 11,255-11,255' 6 1/2" holes					Depth Casing Shoe 14,446' KB			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8"		334'		275 SXS			
11"	9-5/8"		5193'		900 SXS			
7-7/8"	5-1/2"		14446'		1000 SXS			

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

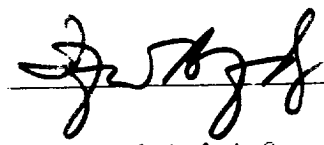
Date First New Oil Run To Tanks 5-29-70	Date of Test 6-3-70	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs.	Tubing Pressure 200# psi	Casing Pressure 0	Choke Size 16/64"
Actual Prod. During Test 132	Oil-Bbls. 132	Water-Bbls. 0	Gas-MMCF 198

GAS WELL

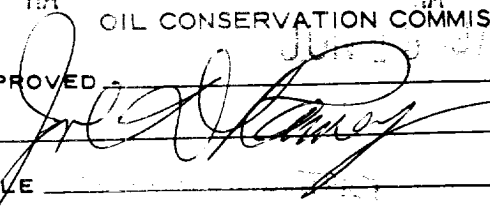
Actual Prod. Test-MMCF/D NA	Length of Test NA	Bbls. Condensate/MMCF NA	Gravity of Condensate NA
Testing Method (pitot, back pr.) NA	Tubing Pressure (Shut-in) NA	Casing Pressure (Shut-in) NA	Choke Size NA

VI. CERTIFICATE OF COMPLIANCE

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.


(Signature) **Foy L. Boyd, Jr.**
District Superintendent

6/10/70 (Date)

OIL CONSERVATION COMMISSION
APPROVED  19
BY
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.

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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.