STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION P. O. BOX 2028 SANTA FE, NEW MEXICO 87501

Form C-194 Revised 10-01-78 Format 06-01-83 Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.	AUTHORIZATION TO TRANS	PORT OII	L AND NATU	RAL GAS		•		
Operator								
Kirby Exploration Company	of Texas							
Address				····				
P. O. Box 1745 Houston,	Texas 77251							
Reason(s) for filing (Check proper box)			Other (Please	expiain)				
New Aett	Change in Transporter of:		ļ					
Recompletion		ry Gas				•		
Change in Ownership	Castnghead Gas C	ondensate						
If change of ownership give name	•					-		
and address of previous owner				· · · · · · · · · · · · · · · · · · ·				
W DESCRIPTION OF HERY AND AV	9 42	<i>(</i>)	P. 11 0	1 -	-			
II. DESCRIPTION OF WELL AND LE	Well No. Pool Name, Including F	2 VIII	Kana, h	Kind of Lease		Lease No.		
Sims Federal	3 Wantz ABO K	·8593	-160	State, Federal or Fee	Federal	NM-		
Location	ΙΔ	- 10013	7/:/8 5			029029B		
	Nonth		660		ast	0230230		
Unit Letter H : 1980	Feel From The North Lin	ne and	300	_ Feet From The	_us c			
Line of Section 7 Township	P 22S Range	38E	, NMPM,	. Lea	•	County		
Cara di decition.	223 110.140	UUL	, , , , , , , , , , , , , , , , , , , ,					
III. DESIGNATION OF TRANSPORT	TER OF OIL AND NATTIRA	I. GAS						
Name of Authorized Transporter of Ct.	or Condensate	Andress	(Give address s	o which approved copy	of this form is to	be sentj		
Phillips Petroleum Compar	nv - Trucks	4001	Penbrook	Odessa, Texa	s 79762			
Name of Authorized Transporter of Castinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)								
If well produces oil or liquids, Unit	Sec. Twp. Rge.	la qua de	tually connecte	d? When				
	/G	No.	0	<u> </u>				
If this production is commingled with the	at from any other lease or pool,	give com	mingling order	number:				
NOTE: Complete Parts IV and V on	reverse state if necessary.							
VI. CERTIFICATE OF COMPLIANCE			OIL C	ONSERVATION D	IVISION			
	• .	.		ER 1 0 1986	,			
I hereby certify that the rules and regulations of been complied with and that the information give		APPR	OVED	FR I II 1200		19		
my knowledge and belief.	BY	ON	CHARL SHONED BY	JERRY SEXTO	N			
•				DISTRICT I SUP	RVISOR			
		TITLE	:					
		1	his form is to	be filed in complian	ics with RULE	1104.		
Camer Som		11		eat for allowable for				
(Signature)				be accompanied by veil in accordance w				
Regulatory Supervisor		!!		this form must be fill				
(Tiela)				completed wells.		, =11010		
1-31-86				ections I, II, III, ar				
(Date)				or transporter or oth				
			perate Forms ted wells.	C-104 must be file	id for each bo-	or in mutiply		

IV. COMPLETION DATA							
Designate Type of Completi	ion — (X) Oil Well Gas Well	New Well Workover	Deepen	Plug Back	Same Res'v. Diff. Res'		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	<u> </u>	P.B.T.D.	<u> </u>		
Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oll/Gas Pay	·	Tubing Depth Depth Casing Shoe			
Perforations							
	TUBING, CASING, A	ND CEMENTING RECOR	D				
HOLE SIZE	CASING & TUBING SIZE	DEPTH SE		SACKS CEMENT			
							
V. TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks	FOR ALLOWABLE (Test must be able for this a	after recovery of total volum lepth or be for full 24 hours; Producing Method (Flow,			wal to or exceed top allow		
Length of Teet	Tubing Pressure	·					
	. mand Liesema	Casing Preseure	• .	Choke Size			
Actual Prod. During Test	Oil · Bbls.	Water - Bbis.	-	Gas-MCF			
AS WELL	1	<u> </u>		<u> </u>			
Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	· · · · · · · · · · · · · · · · · · ·	Gravity of C	ondeneate		
Testing Method (pitot, back pr.)	Tubing Pressure (Shug-im)	Casing Pressure (Shut-	(=)				
		(ITABWE (BOUCE))	Choke Size			



STATE OF NEW MEXICO AGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION P. O. DOX 2088 SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWARIE

THANSPORTER DAS	-}	-{			REC		AND	VOCE			
OPERATOR		1	AUT	HORIZ	ATION		SPORT OIL	UTAH CHA	IRAL GAS		
PROMATION OFFICE					Of	Texas			···		
	rby E	xpiora	tion C	ompan	y 01					· · · · · · · · · · · · · · · · · · ·	
			Hous	ton,	Texas	7725	51.				
Reason(s) for filing (New Well	Check p	eoper box				,		Other (Pleas	e explain)		
Recompletion	H		Oil	nge in i	I dus borte	rou: DrγC					
Change in Ownership			Casi	Ingheod (Cas 🗌		ensate 🗍				
change of owners				Petr	o-Lewi	s Corpo	ration	P.O. B	ox 2250	Denver, Colo	rado 80201
ESCRIPTION OF	F WEL	L AND	LEASE								
Sims Fed	0201		Well	3 P		including b ntz ABO	formation		Kind of Leas State, Feder		NM-
ocation	erar				Wal	ILZ TIBO			XXX	- AAAA	¹ 029029B
Unit Letter	Н	:198	0 Fee	1 From 7	rh• No	rth L	ne and66	50	Feet From	The East	
Line of Section	7	То	eship.	22 S		Range	38E	, ММРМ	l	Lea	County
ESIGNATION OF	TDA	vspor1	בנה טב	OIT AN	ND NAT	מ ממיני	4 5				
Come of Authorized					ensate [Address (C	ne address	so which appro	ved copy of this form	is to be sent)
Permian land of Authorized 7					or Dry (ouston, TX	77001
cure of Anthorized 1	runsport	tet of Car	" Tuend O	4• []	0, 5, 7	345 []	Vagiess	, i.e _2u/e33	to which appro	bea copy of this form	113 10 06 31 1117
! well produces oil o		٠,	Unit B/G	Sec.	7wp.	Rge.	1	.zy connect	ed? Wh	en	
ive location of tanks		5 - A	<u> </u>	L			No		· · · · · · · · · · · · · · · · · · ·		
this production is OMPLETION DA		igied wi:	n that Iro								0 1 10// 0
Designate Type	e of Co	mpletio	n - (X)	Oil V	Well !	Gas Well	Naw Well	retrkover I	Deepen	Plug Back Same	Restv. Dill. Hes
Date Spudded			Date Com	pl. Reas	ly to Prod	1.	Total Dept	h	<u>l </u>	P.B.T.D.	
levations (DF, RKB,	RT. GR	?, etc.,	'ame of	Producin	g Formati	lon	Top OII/G:	as Fay		Tubing Depth	
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eriorations										Depth Casing Shoe	•
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HOLES	IZE		CAS	SING &	TUBING	SIZE	 	CEPTH SE	<u> </u>	SACKS	CEMENT
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EST DATA AND	REQU	EST FO	R ALLC	WABL	E (Tes					and must be equal to	or exceed top all:
IL WELL ole First New Oil Ri	on To To	nks .	Date of T	••t	<u>a</u> b l e	e for this di	Producing i	•	, pump, gas li	fi, etc.)	
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ength of Test			Tubing Pi				Casing Pil	••••		Choto Site	
ctual Prod. During T	•=!		Cil-Bbis.				Water - Bble			Ga••MCF	
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AS WELL							,		·		
ctual Frod. Test+MC	CF/D		Length of	Test			Bbls. Cond	enezie/MMCF		Gravity of Conden	s a la
selling Method (pitor,	back pr	·/	Tubing i'i	•••w•(Shut-in)	Cosing Pre	•s=• (Shut-	·in)	Choke Size	
RTIFICATE OF	COME	LIANC	E					OIL CO	DNSERVAT	IDN DIVISION	
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rision have been	complie	id with i	and that	the Info	noiteme	given	nv			m av irogy SEXI	ON
ove is true and complete to the best of my knowledge and belief.				ORIGINAL SIGNED BY IFERY SEXTON DISTRICT I SUPERVISOR							
						This form is to be filed in compliance with null 1104.					
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(Signature)					well, this	o torm must. on on the v	be accompa vell in accor	nied by a tabulation dance with RULE	on of the deviati		
Product	ion S	upervi (Tille			 		N11	ections of	thie form mu	et be filled out co	mplutaly for allo
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