DISTRIBUTION NEW MEXICO OIL CONSERVATION CON Form C-104 SANTA FE Supersedes Old C-104 and C-110 Effective 1-1-65 REQUEST FOR ALLOWABLE FILE AND U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE RECEIVED OIL TRANSPORTER JUN 8 OPERATOR 1982 PRORATION OFFICE O. C. D. The Harlow Corporation ARTESIA, OFFICE Address 600 Petroleum Building, Amarillo, Texas 79101 Reason(s) for filing (Check proper box) Other (Please explain) Change in Transporter of: x Recompletion Dry Gas Change in Ownership Casinghead Gas Condensate If change of ownership give name and address of previous owner ____ II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Kind of Lease Lease No. Kuchemann 2 Twin Lakes - San Andres Assoc State, Federal or Fee Fee Location 2310 Feet From The North Line and Unit Letter 660 _ Feet From The <u>West</u> 30 Township 8 South Range 29 East Line of Section , NMPM, Chaves County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS | Name of Authorized Transporter of Oil | x | or Condensate | | Address (Give address to which approved copy of this form is to be sent) Bay 159 Navajo Crude Oil Purchasing Company arcesia n.m Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas or Dry Gas Harlow Is gas actually connected? The Sec. Twp. P.ge. If well produces oil or liquids, give location of tanks. :30 ¦8\$ 29E D If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oil Well TGas Well Deepen Plug Back Same Res'v. Diff. Res'v. Designate Type of Completion - (X) Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D. Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth Perforations Depth Casing Shoe TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE SACKS CEMENT V. TEST DATA AND REQUEST FOR ALLOWABLE (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) OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Choke Size Length of Test Tubing Pressure Casing Pressure Actual Prod. During Test Oil-Bbls. Water - Bbla. Gga - MCF **GAS WELL** Actual Prod. Test-MCF/D Bbls. Condensate/MMCF Length of Test Gravity of Condensate Casing Pressure (Shut-in) Tubing Pressure (Shut-in) Choke Size Testing Method (pitot, back pr.) OIL CONSERVATION COMMISSION JUN 1 0 1982 /I. CERTIFICATE OF COMPLIANCE APPROVED 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. BY. SUPERVISOR, DISTRICT 11

W. Van Harlow, III (Signature,

Executive Vice President

(Tiple) 11/22 (Date)

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, rell name or number, or transporter, or other such change of condition.

Senerate Forms C-104 must be filed for each cool in multiply