| OISTRIBUTION SANTA FE LILE | | L CONSERVATION COLESSION ST FOR ALLOWABLE | Poim C-104 Supersodes Old C-104 und | |
|---|---|--|--|--|
| U.S.G.S. | AUTHORIZATION TO T | AND FRANSPORT OIL AND NATURAL | Ellective 1-1-65 | |
| TRANSPORTER OIL L | | • | MAR 0.2 1981 | |
| PROBATION OFFICE | 1 | | Q 0. p. | |
| THE HARLOW (| CORPORATION | | ARTESIA, OFFICE | |
| Address 600 Petrole | um Building, Amarillo, TX | 79101 | | |
| Reason(s) for filing (Check prope | Change in Transporter of: | Other (Please explain) | | |
| Recompletion Change in Ownership | OII Dry | CASINGHEAD GAS MUST NOT BE FLARED AFTER SILVENTED IN EXCEPTION TO Rule 306 | | |
| If change of ownership give name and address of previous owner. | n e | IS OBTAINED | ACEITION TO Rule 300 | |
| . DESCRIPTION OF WELL A | | | | |
| t.ease Name Barkneht | Well No. Pool Name, Including | | Leane : | |
| Location | | s Eye - San Andres State, Fede | rol or Fee Fee | |
| Unit Letter ;;; | 2310 Feet From The South L | Ine and 330 Feet From | The East | |
| Line of Section 12 | Township 85 Range | 28E , ммрм, Chav | es Count | |
| . DESIGNATION OF TRANSP | ORTER OF OIL AND NATURAL G | FAS | | |
| Name of Authorized Transporter of Brio Petrole | Oil (X) or Condensate | Address (Give address to which appr | oved copy of this form is to be 375215 | |
| Name of Authorized Transporter of | | 12700 Park Central Dr Address (Give address to which appro | . Suite 215, Dallas, TX oved copy of this form is to be sent | |
| * | 11 | | | |
| If well produces oil or liquids, give location of tanks. | Unit Sec. Twp. Rge. | • | hen | |
| If this production is commingled | with that from any other lease or pool | | | |
| Designate Type of Complete | Oil Well Cas Well | New Well Workover Deepen | Plug Back Same flesty. Diff. Res | |
| Date Spuddod | Date Compl. Ready to Prod. | Total Depth | | |
| 12/15/81 Elevations (DF, RKB, RT, GR, etc. | | 2861' | Р.В.Т.D. | |
| . | j | Top Oil/Gas Pay | Tubing Depth | |
| 4194GL Perforations | San Andres | 2718' | 27931 Depth Casing Shoe | |
| 2718-221, 273 | 18-32. 2738-40 | | 2860 | |
| | | D CEMENTING RECORD | | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT | |
| 7 7/8" | 8 5/8" 5 1/2" | 105' | 4 yds | |
| | 2" | 2793' | 125 sx | |
| TECCE EL TILA AND DECOMPOSE | EOD AT YOUR PLANT | | | |
| TEST DATA AND REQUEST OIL WELL | | after recovery of total volume of load oil epih or be for full 24 hours; | Y | |
| Date First New Oil Run To Tanks | Date of Test | Producing Method (Flow, pump, gas li) | (t, etc.) | |
| 2/3/81 | Tubing Pressure | Pump Casing Pressure | 18 | |
| 24 hrs | 20 | 20 | Choke Size | |
| Actual Pred. During Test | OII - Bbls. | Water-Bbis. | Gas-MCF | |
| 18 | 3 | 15 | 2 | |
| GAS WELL | | · | | |
| Actual Fred. Test-MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate | |
| Testing Mothed (pitot, back pr.) | Tubing Pressure (Shub-in) | Casing Pressure (Shut-in) | Choke Size | |
| CERTUICATE OF COUNTY | NOE | 011 00110 | | |
| CERTIFICATE OF COMPLIANCE | | OIL CONSERVATION COMMISSION | | |
| I hereby cortify that the rules and | regulations of the Oil Conservation | APPROVED MAR 0 3 1981 . 19 | | |
| Committees neve been complled above is true and complete to the | with and that the information given no best of my knowledge and belief. | DY N. A. S. | resset | |

This form is to be filed in compliance with MULE 1104.

SUPERVISOR, DISTRICT, L

TITLE .

Production_Engineer (Tile)

(Date)

2/27/81

If this is a request for allowable for a newly dellied or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with MULL 111.

All sections of this form must be filled out completely for allowable on now and is completed violis.

Fift out only Scittons I, B, III, and VI for changes of agency, well name or number, or transporter, or other such change of condition.