

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501Form C-104
Revised 10-1-78

RECEIVED

NOV 30 1981

O. C. D.
ARTESIA, OFFICEREQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

| | |
|-------------------|--|
| NO. OF APPLICANTS | |
| DISTRICT | |
| SANTA FE | |
| FILE | |
| U.S.O.B. | |
| LAND OFFICE | |
| TRANSPORTER | |
| OIL | |
| GAS | |
| OPERATION | |
| PRODUCTION OFFICE | |

| | |
|----------------------------------------------------|-----------------------------------------------------------------------------|
| Operator THE HARLOW CORPORATION | |
| Address 600 Petroleum Bldg, Amarillo, TX, 79101 | |
| 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 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 _____

DESCRIPTION OF WELL AND LEASE

| | | | | |
|--------------------------------|----------------|----------------------------------------------------------------|----------------------------------------|-----------------------|
| Lease Name O'Brien Fee "19" | Well No. 7 | Pool Name, including Formation Twin Lakes-San Andres Assoc. | Kind of Lease State, Federal or Fee | Lease Fee |
| Location | | | | |
| Unit Letter I | 2310 | Feet From The South | Line and 990 | Feet From The East |
| Line of Section 19 | Township 8S | Range 29E | NMPM, Chaves | Com |

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|------------|------------|-------------|-----------------------------------|------------------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Brio Petroleum Inc | Address (Give address to which approved copy of this form is to be sent) 12700 Park Place Dr., Suite 215, Dallas TX 75251 | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> The Harlow Corp. Mapco Production Co | Address (Give address to which approved copy of this form is to be sent) 600 Petroleum Bldg 1800 S. Baltimore, Tulsa OK 74119 Amarillo TX 79101 | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit N | Sec. 19 | Twp. 8S | Rge. 29E | Is gas actually connected? Yes | When 10/31/81 |

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

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"/> | Some Reelv. <input type="checkbox"/> | Diff. P. <input type="checkbox"/> |
| Date Spudded 3/19/81 | Date Compl. Ready to Prod. 10/30/81 | | Total Depth 2845 | | | P.B.T.D. 2729 | | |
| Elevations (DF, RKB, RT, GR, etc.) 3933 GL | Name of Producing Formation San Andres | | Top Oil/Gas Pay 2660 | | | Tubing Depth 2596 | | |
| Perforations 1765-68 (Sealed) | 2660-26-87 | | | | | Depth Casing Shoe 2845 | | |

TUBING, CASING, AND CEMENTING RECORD

| | | | |
|-----------|----------------------|-----------|--------------|
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| 11" | 8 5/8" | 126' | 4 yds |
| 7 7/8" | 5 1/2" | 1868' | 100 sx |
| 4 3/4" | 4" O.D. | 2810' | 265 sx |
| | 2 3/8 E.U. | 2596' | |

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 of
able for this depth or be for full 24 hours)

| | | | |
|---------------------------------------------|--------------------------|-------------------------------------------------------|--------------------|
| Date First New Oil Run To Tanks 10/30/81 | Date of Test 11/16/81 | Producing Method (Flow, pump, gas lift, etc.) Pump | |
| Length of Test 24 hr. | Tubing Pressure 22# | Casing Pressure 22# | Choke Size None |
| Actual Prod. During Test 34 | Oil-Bbls. 2 | Water-Bbls. 32 | Gas-MCF 4 |

GAS WELL

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

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation
Division have been complied with and that the information given
above is true and complete to the best of my knowledge and belief.

W. B. LaFon
(Signature)
Production Engineer
(Title)
11/25/81
(Date)

OIL CONSERVATION DIVISION

APPROVED DEC - 1 1981, 19
BY W. O. Gressett
TITLE SUPERVISOR, DISTRICT II

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

If this is a request for allowable for a newly drilled or deep
well, this form must be accompanied by a tabulation of the devi
tests taken on the well in accordance with RULE 111.All sections of this form must be filled out completely for all
able on new and recompleted wells.Fill out only Sections I, II, III, and VI for changes of o
well name or number, or transporter, or other such change of condiSeparate Forms C-104 must be filed for each pool in multi
completed wells.