	DISTRIBUTION SANTA FE FILE U.S.G.S.	REQUES	CONSERVATION VIMISSION T FOR ALLOWAGE AND	Form C-104 Supersedes Old C-104 and C- Effective 1-1-65
	LAND OFFICE TRANSPORTER OIL GAS OPERATOR	JUN 04 1986 O. C. D	RANSPORT OIL AND NATURA	AL GAS
	Operator The Harley Corne	ARTESIA, OFFICE		
	The Harlow Corporation V			
	Reason(s) for filing (Check proper be New Well Recompletion Change in Ownership	Change in Transporter of: Oil X Dry (79101 Other (Please explain) Gas ensate	
	If change of ownership give name and address of previous owner			
•	DESCRIPTION OF WELL AND Lease Name Kuchemann Location	Well No. Pool Name, Including	Formation Kind of L San Andres Asso State, Fe	
	1	90 Feet From The North L	ine and 954 Feet Fr	om The West
	Line of Section 30 To	ownship 8 South Hange 2		haves County
٠.,	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL G.		AS SCURLOCK PERMIAN CORP EFF 9-1-91	
	Name of Authorized Transporter of Co	oration Permian (Eff. 9 / 1 /87)	P. O. Box 1183, Ho	oproved copy of this form is to be sent) uston, Texas 77251 uproved copy of this form is to be sent)
i.	The Harlow Corpo If well produces oil or liquids, give location of tanks.	ration	600 Petroleum Buil ls gas actually connected? Yes	ding, Amarillo, TX 79101 When 10-25-81
	If this production is commingled w. COMPLETION DATA	ith that from any other lease or pool	-	
: -	Designate Type of Completi		New Well Workover Deepen	Plug Back Samo Res'v. Dift. Res'v
;	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
ĺ	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Perforations			Depth Casing Shoo
;-	TUBING, CASING, AND HOLE SIZE CASING & TUBING SIZE		D CEMENTING RECORD	
-		CASING & IDBING SIZE	DEPTH SET	SACKS CEMENT
-				6-13-86 Chg LT: HRC
	rest data and request f	OD ATTOMADTE OF		
(MI. WELL Date First New Oil Run To Tanks	Date of Test	epth or be for full 24 hours) Producing Method (Flow, pump, gas	oll and must be equal to or exceed top allow
 	Length of Test	Thu D		
-		Tubing Pressure	Casing Pressure	Choke Size
	Actual Prod. During Test	Oll-Bbls.	Water - Bbls.	Gaa-MCF
(GAS WELL			
	Actual Prod. Tost-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condonaata
	Testing Method (pitot, 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		OIL CONSERVATION COMMISSION JUN 10 1986 APPROVED Original Signed By Les A. Clements		
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.				
	also Walled		TITLE Supervisor District II	
W. V. Harlow, Jr. (Signature) President (Title) 6-3-86 (Date)			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.	



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ાર્ક તાલા**વધી ઉપલ્લોનો** ૧ ભૂતુમારી, ૧ પૂર્વ ૧ લાકે હવા ભાવની