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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-111
Effective 1-1-65

RECEIVED

OCT - 5 1981

O. C. D.

ARTESIA, OFFICE

Operator The Harlow Corp	
Address 600 Petroleum Building, Amarillo, TX 79101	
Reason(s) for filing (Check proper box)	
New Well ☒	Change in Transporter of:
Recompletion ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☐	casinghead Gas ☐ Condensate ☐
Other (Please explain) CASINGHEAD GAS MUST NOT BE BEARED AFTER 12-1-81 UNLESS AN EXCEPTION TO Rule 306 IS OBTAINED	

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name O'Brien Fee "18"	Well No. 5	Pool Name, Including Formation Twin Lakes, San Andres <i>assoc.</i>	Kind of Lease State, Federal or Fee	Lease No. Fee
Location Unit Letter <i>K</i> <i>1650</i> Feet From The <i>South</i> Line and <i>1963</i> Feet From The <i>West</i>				
Line of Section <i>18</i> Township <i>8S</i> Range <i>29E</i> <i>N.M.M.</i> Chaves County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent) Brio Petroleum 12700 Park Central/Suite 215/Dallas, TX 75251					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit <i>L</i>	Sec. <i>18</i>	Twp. <i>8S</i>	Rge. <i>29E</i>	Is gas actually connected? <i>No</i>	When

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well ☒	Gas Well ☐	New Well ☒	Workover ☐	Deepen ☐	Log Back ☐	Same Res't. ☐	Diff. Res't. ☐
Date Spudded <i>7/21/81</i>	Date Compl. Ready to Prod. <i>9/16/81</i>		Total Depth <i>2820</i>		P.B.T.D. <i>2768</i>			
Elevations (DF, RKB, RT, GR, etc.) <i>4007GL</i>	Name of Producing Formation <i>San Andres</i>		Top Oil/Gas Pay <i>2672</i>		Tubing Depth <i>2670</i>			
Perforations <i>2684-88, 2677-79, 2672-74 4/ft</i>					Depth Casing Shoe <i>2820</i>			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<i>11 1/2</i>	<i>8 5/8</i>	<i>123</i>	<i>5 yds.</i>
<i>7 7/8</i>	<i>5 1/2</i>	<i>2820</i>	<i>125 sx</i>
	<i>2 3/8</i>	<i>2670</i>	

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of initial surge of load oil and must be equal to or exceed production rate for this depth or be for full 24 hours)

Date First New Oil Run To Tanks <i>9/16/81</i>	Date of Test <i>9/29/81</i>	Producing Method (pump, gas lift, etc.) <i>Pump</i>	
Length of Test <i>24 hrs</i>	Tubing Pressure <i>29#</i>	Casing Pressure <i>29#</i>	Choke Size <i>none</i>
Actual Prod. During Test <i>448bbls</i>	Oil-Bbls. <i>34</i>	Water-Bbls. <i>10</i>	Gas-MCF <i>7</i>

Posted ID-2
+ Comp. Book
BPI
10-9-81

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 Commission 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
W.B. LaFon
Production Engineer
(Signature)
(Title)
10-2-81
(Date)

OIL CONSERVATION COMMISSION

APPROVED *OCT 6 1981*, 19
BY *W.A. 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 deepened well, this form must be accompanied by a tabulation of the deviated tests taken on the well in accordance with RULE 111.

All portions of this form must be filled out completely for allowable on a newly completed well.

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.