

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

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O. C. D.

ARTESIA, OFFICE

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

CO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	1
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LAND OFFICE	
TRANSPORTER	1
OIL	1
GAS	1
OPERATOR	1
REGISTRATION OFFICE	

The Harlow Corporation /

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)

If change of ownership give name  
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name O'Brien Fee "18"	Well No. #6	Pool Name, Including Formation Twin Lakes - San Andres Assoc.	Kind of Lease State, Federal or Fee	Lease Fee
Location Unit Letter J : 1650 Feet From The South Line and 2310 Feet From The East Line of Section 18 Township 8 South Range 29 East, NMPM, Chaves County				

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., Suite 215, 12700 Park Central Dr., Dallas TX 75251	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Mapco Production Co.	Address (Give address to which approved copy of this form is to be sent) 1800 S. Baltimore Ave., Tulsa OK 74119					
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 18	Twp. 8S	Rge. 29E	Is gas actually connected? yes	When 2-7-82

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"/>	Same Resv. <input type="checkbox"/>	Diff. R. <input type="checkbox"/>
Date Spudded 12-1-81	Date Compl. Ready to Prod. 1-7-82		Total Depth 2840'		P.B.T.D. 2806'			
Elevations (DF, RKB, RT, GR, etc.) 4110 GR	Name of Producing Formation San Andres		Top Oil/Gas Pay 2686'		Tubing Depth 2686'			
Perforations 2686' - 2696'; 2703' - 2707'					Depth Casing Shoe 2814'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
11 1/2"	8 5/8"	110'	4 yds.
7 7/8"	5 1/2"	2814'	125 sx

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 1-29-82	Date of Test 2-17-82	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs	Tubing Pressure 5" HG	Casing Pressure	Choke Size none
Actual Prod. During Test	Oil-Bbls. 5	Water-Bbls. 45	Gas-MCF 3

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. Van Harlow, III (Signature)  
Executive Vice President  
(Title)

March 10, 1982

(Date)

OIL CONSERVATION DIVISION

APPROVED APR 14 1982

BY W. A. Gressett

TITLE SUPERVISOR, DISTRICT D

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 device  
tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all  
wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of own  
well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multi-  
completed wells.

Posted ID-2  
+ Comp. Book  
BPE + Mapco  
4-16-82