	NO. OF COPIES RECEIVED			
	DISTRIBUTION	NEW MEXICO OIL	CONSERVATION COMMISSINGN	Dee C. Isa
	SANTA FE		FOR ALLOWABLE	Form C+104 Supersedes Old C-104 and C-110
	FILE	RECEIVED	AND	Effective 1-1-65
	U.S.G.5,	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL	GAS
	LAND OFFICE	MAY 21 198	£	
	TRANSPORTER GAS		~~	
	OPERATOR V	O. C. D.	i	
I.	PROBATION OFFICE	ARTESIA, CHEK	用	
	Operator			
	BHP Petroleum Company Inc.			
	Address			
	1300 One First City Center, Midland, Texas 79701			
	Reason(s) for filing (Check proper box) Other (Please explain)			
	New Well Change in Transporter of:			
	Recompletion	OII Dry G	F 1	
	Change in Ownership Casinghead Gas Condensate			
	If change of ownership give nam	• Monsanto Oil Company, 130	On One First City County	W: 11 1 m =
	and address of previous owner _	Tombalite off Company, 150	one First City Center,	Midland, Texas 79701
:1	DESCRIPTION OF WELL AS	IN FEACE		
	Lease Name	Well No. Pool Name, Including	Formation Kind of Leas	se Leuse No.
	Burton Flat Deep Un	it 9 Burton Flat -	- Morrow Gas State, Feder	ol or Fee Federal NM 0442882
	Location			11 0442002
	Unit Letter ;	1980 north	ne andFeet From	west
				i ne
	Line of Section 35	Township 20S Range	28E , NMPM,	Eddy
Ξ.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Noire of Authorized Transporter of Oil or Condensate Address (Give address to which approved cany of this form to be read.)			
	The Permian Corp.	<u> </u>	Address (Give address to which appro	oved copy of this form is to be sent)
	1	Permian (Eff. 9 / 1 /87) Casinghead Gas or Dry Gas 7	P. O. Box 1183, Housto	
	Action 2 Action 2 and 1 tems poster of	or Dry Gas	Address (Give address to which appro	oved copy of this form is to be sent)
		Unit Sec. Twp. P.ge.	Is gas actually connected? Wh	
	If well produces oil or liquids, give location of tanks.	E 35 20s 28E		ell Shut-in
				cri sidt ili
v.	If this production is commingled COMPLETION DATA	with that from any other lease or pool,	give commingling order number:	
• •		Oil Well Gas Well	New Weil Workover Deepen	Plug Back Same Resty. Diff. Resty.
	Designate Type of Comple	ction = (X)		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Elevations (DF, RKB, RT, GR, etc	, Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
			<u> </u>	
	Perforations			Depth Casing Shoe
		TIBING CASING AN	a crucurius aresas	
	HOLE SIZE	CASING & TUBING SIZE	D CEMENTING RECORD DEPTH SET	SACKS CENTUR
	11022 3122	CASING & LOBING SIZE	DEFINSCI	SACKS CEMENT
				10st ID-3 8-1-86
				C1- 10
				200
٧.	VEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to ar exceed top allows			
	DIL, WELL, able for this depth or be for full 24 hours)			
	Bute First New Off Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	fi, etc.)
	Length of Tost	Tubing Pressure	Conton Program	
	Length of Tool	Turing Pressure	Casing Preseure	Choke Size
	Actual Prog. During Test	Oil-Bhie.	Water-Bbla.	Gae-MCF
	·			
,	· · · · · · · · · · · · · · · · · · ·			
	GAS WELL			
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	·			
	Testing Method (pitot, back pr.)	Tubing Pressure (Sint-in)	Casing Fressure (Shut-in)	Choke Size
l				
Ί.	CERTIFICATE OF COMPLIA	NCE	OIL CONSERVA	TION COMMISSION
			APPROVED	
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.		11		
		BY Original Signed By Les A. Clements		
		Les A. Clements		
		TITLE Supervisor District II		
	42 Porces		This form is to be filed in compliance with RULE 1104.	
-	1000		If this is a request for allowable for a newly drilled or despense	
	D. F. Brown - Managam Couthern Paris		well, this form must be accompanied by a tabulation of the coverties tests taken on the well in accordance with RULE 111.	
			tests taken on the well in accor	dence with RULE 111.
-	D. E. Brown - Manage	r Southwestern Region	tests taken on the well in accor	dence with RULE 111. st he filled out completely for alle to
-	D. E. Brown - Manage		All zections of this form mu able on new and recompleted we	dence with RULE 111. It has filled out completely for allowers ille.
-	D. E. Brown - Manage (April 30, 1986	r Southwestern Region	tests taken on the well in according to the form into while on new and recompleted we Fill out only Sections I. II	dence with RULE 111. st be filled out completely for alle to