NO. O" COPIES RECEIVED	1		
DISTRIBUTION	1	CONCEDIVATION OF ASSIGN	
SANTA FE		CONSERVATION CC 11SSION	Form C-104 Supersedes Old C-104 and
FILE	REQUES	T FOR ALLOWABL_ AND	Effective 1-1-65
u.s.c.s.	ALITHOPIZATION TO TE	RANSPORT OIL AND NATURAL	CAS
LAND OFFICE	AUTHORIZATION TO TH	RANSPORT OIL AND NATURAL	GAS
TRANSPORTER OIL GAS	-	•	
OPERATOR	+		
I. PRORATION OFFICE Operator			
BTA OIL PRODUCERS	····		
104 South Pecos	Midland, Texas 7970		
Reason(s) for filing (Check proper box		Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion	Oil X Dry	F	
Change in Ownership	Casinghead Gas Cond	lensate	
If change of ownership give name and address of previous owner			
II. DESCRIPTION OF WELL AND	LEASE   Well No.   Pool Name, Including	Formation Kind of Lea	se Legse N
Lea, 7406 JV-S	6 Comanche Stat	1/1-	i =
Location		7.66	
Unit Letter F ; 2	310 Feet From The North L	ine and 1650 Feet From	The West
Line of Section 28 Tov	wnship 26 Range	36 , ммрм,	Lea Count
III. DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL G	AS (C)	
Name of Authorized Transporter of Oil	Controlly Operating LP	Address (Give address to which appro	
Name of Authorized Transporter of Cas	INY Licente Ti oa	8700 Tesoro Drive, Sa Address (Give address to which appro	n Antonio, TX 78286
			·
EL PASO NATURAL GAS CO	Unit Sec. Twp. P.ge.	P. O. Box 1492, El Pa	
If well produces oil or liquids, give location of tanks.	N 28 26 36	Yes	
If this production is commingled wit	th that from any other lease or pool	l, give commingling order number:	
	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res
Designate Type of Completion		1	1 1
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
Perforations			Depth Casing Shoe
	THRING CASING AN	ND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
HOLE SIZE	CRIMO di 100 MO 3/22		
The state of the s	OP ALLOWARIE (Test mostic	after recovery of total volume of load oil	land must be equal to an extend to a cl
V. TEST DATA AND REQUEST FO	able for this	depth or be for full 24 hours)	and must be equal to or exceed top at
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	ift, etc.)
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bhis.	Water - Bbls.	Gas-MCF
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	

JUN 30 1982 APPROVED. ORIGINAL SIGNED BY

BY. JERRY SEXTON

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

If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviatitests taken on the well in accordance with RULE 111.

DISTRICT 1 SUPR

All sections of this form must be filled out completely for allo able 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 conditions.

(Date)

Production Clerk

6/28/82

(Title)

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.

TITLE .