

Submit 5 Copies  
Appropriate District Office  
DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico  
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

RECEIVED

Form C-104  
Revised 1-1-89  
See Instructions  
at Bottom of Page

MAY 24 '90

O. C. D.  
ARTESIA, OFFICE

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator BTA OIL PRODUCERS		Well API No. 30-015-26341
Address 104 South Pecos, Midland, TX 79701		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of: <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/>	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Change in Operator <input type="checkbox"/>		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Pardue -C-, 8808 JV-P	Well No. 1	Pool Name, Including Formation Loving East, Delaware	Kind of Lease State, Federal or <u>Fee</u>	Lease No.
Location Unit Letter <u>-N-</u> : <u>176</u> Feet From The <u>South</u> Line and <u>1550</u> Feet From The <u>West</u> Line Section <u>11</u> Township <u>23-S</u> Range <u>28-E</u> , <u>NMPM</u> , <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Pride Pipeline Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2436, Abilene, TX 79604					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1492, El Paso, TX 79978					
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 11	Twp. 23S	Rge. 28E	Is gas actually connected? Yes	When? 5-18-90

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 4-25-90	Date Compl. Ready to Prod. 5-17-90		Total Depth 6250		P.B.T.D. 6149			
Elevations (DF, RKB, RT, GR, etc.) 2996' GR 3007' RKB	Name of Producing Formation Delaware		Top Oil/Gas Pay 6041		Tubing Depth 5931			
Perforations 6041' - 6114'					Depth Casing Shoe 6250			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8"		535		400 sx - Circ.			
7 7/8"	5 1/2"		6250		1500 sx - TOC @ 1000'			
	2 7/8"		5931					

V. 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 allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank 5-18-90	Date of Test 5-19-90	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs.	Tubing Pressure 1200	Casing Pressure 1100	Choke Size 10/64
Actual Prod. During Test 163	Oil - Bbls. 163	Water - Bbls. 62	Gas - MCF 122

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

VI. OPERATOR 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.

*Dorothy Houghton*  
Signature  
DOROTHY HOUGHTON - Regulatory Administrator  
Printed Name  
5/24/90  
Date  
915/682-3753  
Telephone No.

OIL CONSERVATION DIVISION

MAY 29 1990

Date Approved  
By  
ORIGINAL SIGNED BY  
MIKE WILLIAMS  
SUPERVISOR, DISTRICT II  
Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.