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

State of New Mexico Energy, Minerals and Natural Resources Department.

RECEIVED

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088 OCT 19'90

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

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

O. C. D. ALLOWARD & AND ALITHORIZATION ARTESIA, OFFICE

NO Rio Brazos Rd., Aziec, NM 87410	HEQU	OTRA	NSP	ORT OIL	LE AND A AND NAT	URAL GA	S Well A	No.		
perator						Well All			-015-26341	
BTA Oil Producer								<u> </u>		
104 South Pecos,	Midla	nd, TX	/	9701	Othe	t (Please explai	<u>in)</u>			
ason(s) for Filing (Check proper box) w Well		Change in	Transpe	orter of:		,				
completion	Oil		Dry G	 ∐						
ange in Operator	Casinghea	d Gas 🛚 🗓	Conde	nsate 🗌				<u>.</u>		
ange of operator give name										
address of previous operator										
DESCRIPTION OF WELL A	ND LEA	ASE Well No.	Bool N	Jame Includ	ing Formation		Kind o		Lease No.	
LE NAME	Well No. Pool Name, Including 1 Loving, Eas			ast (Del	st (Delaware)					
Pardue -C-, 8808 JV-P		L <u>+</u> -	1 20	• • • • • • • • • • • • • • • • • • • •						
N	•	176	Feet F	rom The	South Line	and155	<u>0</u> Fee	t From The _	West Line	
Unit LetterN	•						T.1		County	
Section 11 Township	23	S	Range	28	3E , N	MPM,	Eddy		County	
		n or o	TT A 3	ATTA NIA TET	DAI GAS					
DESIGNATION OF TRANS me of Authorized Transporter of Oil		or Conde	il Ar	AN IANI	Address (Giv	e address to wi	rich approved		orm is to be sent)	
Pride Pipeline Co.	T.				P.O.Bo	x 2436,	Abilene	, TX 7	9604	
Pride Pipeline Co.	nead Gas XX or Dry Gas			Address (Giv	e address to wi	hich approved	copy of this fo	orm is to be sent)		
Llano, Inc.					P.O.Bo	x 1320.			38240	
well produces oil or liquids,	Unit M	Sec.	Twp.		. is gas actual	y connected? Yes	When that	, nge effe	ective 11-1-90	
e location of tanks.		11	23		oling order num					
his production is commingled with that it. COMPLETION DATA	from any of	Del lerse of	poor, i	TAR COLLEMN	Files Olon					
. COMPLETION DATA		Oil We	1	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v Diff Res'v	
Designate Type of Completion	- (X)	i	i.			<u> </u>	<u> </u>	<u> </u>	<u> </u>	
ate Spudded		pl. Ready	o Prod.	•	Total Depth			P.B.T.D.		
					Top Oil/Gas	Top Oil/Gas Pay		Tubing Depth		
levations (DF, RKB, RT, GR, etc.)	Name of	Producing 1	OITHALI	06	Top Old Gar	Top Ources 129			* ment rober	
							Depth Casing Shoe			
erforations								<u> </u>		
		TUBINO	, CAS	SING AN	CEMENT	ING RECO	<u> </u>	- 		
HOLE SIZE		ASING & 1				DEPTH SET	<u> </u>		SACKS CEMENT	
								 		
					 			+		
										
. TEST DATA AND REQUE	ST FOR	ALLOV	ABL	E						
. TEST DATA AND REQUES OIL WELL (Test must be after to	recovery of	total volum	e of loc	.— ad oil and m	usi be equal to	or exceed top a	llowable for th	is depth or be	for full 24 hours.)	
Date First New Oil Run To Tank	Date of Test				Producing l	Producing Method (Flow, pump, gas lift,			contract	
	,								100000 20	
Length of Test	Tubing Pressure				Casing Pres	Casing Pressure			10 46	
	100 50	Cii Phi				Water - Bbls.			BRBIT!	
Actual Prod. During Test	Oil - Bb	IB.							<u> </u>	
G & G TIPPE T										
GAS WELL Actual Prod. Test - MCF/D	Length	of Test			Bbls. Cond	ensate/MMCF		Gravity of	Condensate	
Canada Times o day . stranging								Choke Siz		
Testing Method (pilot, back pr.)	Tubing	Pressure (S	nut-in)		Casing Pre	ssure (Shut-in)		Choke Siz	5	
								l		
VL OPERATOR CERTIFIC	CATE	OF CON	1PLL	ANCE		OIL CO	NSER\	/ATION	DIVISION	
and the standard me	ulations of	the Oil Coa	servalic)O.						
I hereby certify that the rules and reg	a 10 2 (86 11	m or thereof	P1 4617 9 1		Da	te Approv	ed	OCT 2	0 1990	
Division have been complied with an	y icnowjede	e and belief			II Da	"o whhine				
Division have been complied with an is true and complete to the best of my	y knowledg	e and belief	21		、 11					
Division have been complied with an	knowledge Was	e and belief	to	u) Bu	୍ଟେଧ	GINAL SI	GNED BY		
Division have been complied with an is true and complete to the best of my	knowledgy // Lee	e and belief	to	<u>U</u>	Ву	A . 13.	GINAL SI			
Division have been complied with an is true and complete to the best of my Signature Dorothy Houghton, R	knowledgy // Lee	e and belief	to	Ustrato	בַ ַ	6.13 (0.13)				
Division have been complied with an is true and complete to the best of my Signature Dorothy Houghton, R Printed Name	knowleds Local Legulat	ory Ad	mini Ti	M strato	111	6.13 (0.13)	(¥ %			
Division have been complied with an is true and complete to the best of my Signature Dorothy Houghton. R	knowleds Local Legulat	ory Ad	mini Ti		בַ ַ	6.13 (0.13)	(¥ %			

- 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.