

OCD - HOBBS
03/07/2017
RECEIVED

District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 S. First St., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-104
Revised August 1, 2011

Submit one copy to appropriate District Office

AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address BTA Oil Producers LLC 104 S. Pecos Midland, TX 79701		² OGRID Number 260297
		³ Reason for Filing Code/ Effective Date NW
⁴ API Number 30 - 025-41289	⁵ Pool Name Jennings; Upper Bone Spring, Shale	⁶ Pool Code 97838
⁷ Property Code 305301	⁸ Property Name 8105 JV-P Mesa	⁹ Well Number 2H

II. ¹⁰ Surface Location

Ul or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
D	11	26S	32E		330	North	430	West	Lea

¹¹ Bottom Hole Location

Ul or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
M	11	26S	32E		326	South	491	West	Lea

¹² Lse Code F	¹³ Producing Method Code F	¹⁴ Gas Connection Date 5/13/15	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date
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III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ O/G/W
248440	Western Refining Company, LP 6500 Trowbridge Drive El Paso, TX 79905	O
298751	Regency Field Services LLC 2001 Bryan Street, Suite 3700 Dallas, TX 75201	G

IV. Well Completion Data

²¹ Spud Date	²² Ready Date	²³ TD	²⁴ PBTB	²⁵ Perforations	²⁶ DHC, MC
9/27/14	5/13/15	14089'	14008	9506-13988'	
²⁷ Hole Size	²⁸ Casing & Tubing Size	²⁹ Depth Set	³⁰ Sacks Cement		
17 1/2"	13 3/8"	770'	770		
12 1/4"	9 5/8"	4532'	1400		
7 7/8"	5 1/2"	14008'	1950 (TOC @ 3550' CBL)		

V. Well Test Data

³¹ Date New Oil 5/11/15	³² Gas Delivery Date 5/13/15	³³ Test Date 5/13/15	³⁴ Test Length 24 Hrs	³⁵ Tbg. Pressure 875	³⁶ Csg. Pressure
³⁷ Choke Size 42/64"	³⁸ Oil 772	³⁹ Water 1229	⁴⁰ Gas 1396	⁴¹ Test Method Flowing	

⁴² I hereby certify that the rules 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. Signature:	OIL CONSERVATION DIVISION Approved by: Title: Petroleum Engineer Approval Date: 03/14/2017
Printed name: Pam Inskeep	
Title: Regulatory Administrator	
E-mail Address: pinskeep@btaoil.com	
Date: 05/13/15	Phone: 432-682-3753

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03/07/2017
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Form 3160-5
(August, 2007)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other Instructions on page 2.

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM14492
2. Name of Operator BTA Oil Producers LLC		6. If Indian, Allottee, or Tribe Name ---
3a. Address 104 S. Pecos Midland, TX 79701	3b. Phone No. (include area code) 432-682-3753	7. If Unit or CA, Agreement Name and/or No. ---
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 330' FNL & 430' FWL, Unit D (NWNW) Sec 11-T26S-R32E		8. Well Name and No. 8105 JV-P Mesa #2H
Lat. Long.		9. APT Well No. 30-025-41289
		10. Field and Pool, or Exploratory Area Jenning; Upper Bone Spring Shale
		11. County or Parish, State Lea NM

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/ Resume)	<input type="checkbox"/> Water Shut-off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <u>Drilling Operations</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths or pertinent markers and sands. Attach the Bond under which the work will be performed or provide the Bond No. on file with the BLM/ BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notice shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

9/27/14 Spud well.

9/29/14 TD 17 1/2" hole @ 924'. Set 13 3/8" 54.5# J-55 csg @ 924'. Cmt w/770 sx Class C. Circ to surface. WOC 18 hrs & test csg to 1500# for 30 mins. Good test.

10/10/14 TD 12 1/4" hole @ 4532'. Set 9 5/8" 40# J-55 csg @ 4532'. Cmt w/1400 sx Class C. Circ to surface. WOC 18 hrs. Test csg to 1650# for 30 mins. Good test.

12/01/14 TD 8 3/4" lateral @ 14008' (KOP @ 8800'). Set 5 1/2" 17# P-110 csg @ 14008'. Cmt w/1950 sx Class C. DNC. TOC @ 3500' (CBL 1/6/15). Installed tbg head & test to 2500# for 10 mins.

12/02/14 Rig released.

14. I hereby certify that the foregoing is true and correct.

Name (Printed/ Typed) Pam Inskeep	Title: Regulatory Administrator
Signature: 	Date: 1/14/15

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by:	Title:	Date:
Conditions of approval, if any are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	Office:	

Title 18 U.S.C. Section 1001 AND Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)