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SANTA FE		
FILE		
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LAND OFFICE		
[RANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		
Operator		

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DISTRIBUTION		CONSERVATION COMMISSIC.	1000000
SANTA FE		FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-
FILE	KE40E31	AND :	Effective 1-1-65
U.S.G.S.	ALITHOPIZATION TO TO		• •
LAND OFFICE	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL GA	45
OIL		and the same of the same of	
TRANSPORTER GAS		•	
OPERATOR	~		
PRORATION OFFICE			
Operator Operator			
·			
BTA Oil Producer	<u> </u>		
104 South Pecos,	Midland, Texas 79701		
Reason(s) for filing (Check proper bo	x)	Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion X	Oil Dry G	as 🔲	
Change in Ownership	Casinghead Gas Conde	ensate	
If change of ownership give name			
and address of previous owner			
DESCRIPTION OF HERE			
DESCRIPTION OF WELL AND Lease Name	Lease No. Well No. Pool No.	die Tallida Daniel	
	Fedse Mg.   Mell Mg.   Lobi Wg	0-9-14/05/11/20 0/00/01/20/11/11	Kind of Lease
LANE "A" 674 Ltd.	· l rLan	re - Penn.	State, Federal or Fee State
Location	• •		
Unit Letter J; 198	BO Feet From The South	ne αnd 1980 Feet From Th	e East
		r est rom in	
Line of Section 1 To	ownship 10-S Range 3	33-E , NMPM, Lea	Count
	10 0 11	75 L , 1341 W, LEA	Count
DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	A C	
Name of Authorized Transporter of Of		AS Address (Give address to which approved	d conv of this form is to be seed
•	Amora Diamline Ca.		
SERVICE PIPE LINE CO	JITE AN I	3411 Knoxville Avenue, L	
Name of Authorized Transporter of Co		Address (Give address to which approve	· · · · · · · · · · · · · · · · · · ·
WARREN PETROLEUM CO	•	Box 1589, Tulsa, Oklahmm	ıa
If well produces oil or liquids,	Unit Sec. Twp. Ege.	Is gas actually connected? When	
give location of tanks.	J 1 10-S 33-E	No	
	<del>-1</del>	·	
if this production is commingled w	ith that from any other lease or pool,	give commingling order number:	
COMPLETION DATA			
Designate Type of Completi	Oil Well Gas Well	1 1	Plug Back   Same Restv. Diff. Res
——————————————————————————————————————	OR = (X)	XX	1
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Sept.30, 1967	October 28, 1967	10,925	9720
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
4240 G.L.	Penn.	9,656	
Perforations	0 - 1-		Depth Casing Shoe
79656' to 9664'	ex & M	'	Depth Casing Shoe
7030 20 3004			
		D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8"	357	325
12 1/4"	9 5/8"	3955	2452
8 3/4"	5 1/2"	9764	500
			<u> </u>
TEST DATA AND REQUEST F	OD ALLOWADIE - cm		
DIL WELL	ohle for this de	fter recovery of total volume of load oil and tpth or be for full 24 hours)	i must be equal to or exceed top allo
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift,	
		, , , , , , , , , , , , , , , , , , , ,	e/
Nov. 3, 1967	December 1, 1967	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs.			
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas - MCF
1025	58	967	30
	•	· · · · · · · · · · · · · · · · · · ·	
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
· · · · · · · · · ·		Table Communication Introduction	Crarty of Condensate
Testing Method Initiat Last 1	Tuping Pro-	Coulo Decision	21
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
<del></del>	1		
CERTIFICATE OF COMPLIAN	CE	OIL CONSERVAT	ION COMMISSION
harahy partify that the miles and	regulations of the Oil Community	APPROVED	
I hereby certify that the rules and regulations of the Oil Conservation  Commission have been complied with and that the information given		23.5	
	best of my knowledge and belief.		
	· · · · · · · · · · · · · · · · · · ·	The state of the s	· •
	/7	TITLE	
37/	<u>//</u>		
M/ will		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 deviation tests taken on the well in accordance with RULE 111.	
(Sign	iture)		
Production Sur	ot.	{ E	
(Ti	ile)	able on new and recompleted wells	be filled out completely for allow.
December 21, 1	1967		II, and VI for changes of owner
	ite)	well name or number, or transporter,	

Fill out only Sections I. II. III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.