	NO. OF COPIES RECEIVED DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER OIL GAS OPERATOR	REQUEST F	NSERVATION COMMISS OR ALLOWABLE AND ISPORT OIL AND NA		Form C-104 Supersedes Old C Effective 1-1-55	-104 and C-110	
1.	Operator The Maurice L. Brown Company 22632.						
	Address						
	P. O. Box 11320 Kansas City, Missouri 64112 Reoson(s) for filing (Check proper box) Other (Please explain)						
	lew Well Change in Transporter of: Recompletion Oil Dry Gas						
	Change in Ownership						
	t change of ownership give name BTA 0il Producers 104 S. Pecos Midland, Texas 79701 nd address of previous owner						
NH.	DESCRIPTION OF WELL AND L	EASF. Well No.; Pool Name, Including For	mation K	ind of Lease		Lease No.	
	Meta 7101	1 I		ate, Federal or Fee	Fee		
Location Unit Letter -J- : 1980 Feet From The South Line and 1980 Feet From The East							
	3	0-5 -	34-Е , ммрм,	Lea		County	
	Line of Section					4	
11.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil X or Condensate Address (Give address to which approved copy of this form is to b Name of Authorized Transporter of Oil X or Condensate					be sent)	
	Mobil Oil Corp. (trucks) Name of Authorized Transporter of Casinghead Gas 👔 or Dry Gas 🗍		Box 900, Dallas, Texas 75221 Address (Give address to which approved copy of this form is to be sent)				
	Warren Petroleum Corp.		Box 1589, Tulsa, Oklahoma 74100				
	If well produces oil or liquids, Unit Sec. Twp. Ege. Is gas actually connected? when give location of tanks. J J 9-S 34-E Yes approx. 6-16-71						
	If this production is commingled with	that from any other lease or pool, g	rive commingling order n	umber:			
Ξ¥.	Designate Type of Completion	n - (X)	New Well Workover	Deepen Plug	Back Same Res*	v. Diff. Res'v.	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.	r.d.		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubir	ng Depth		
	Perforgtions	erforations		Dept	h Casing Shoe		
		TUBING, CASING, AND	CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SE		SACKS CEM	ENT	
				·			
V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be able for this depth or be for full 24 hours)						xceed top allow-	
	OIL WELL Date First New Oll Run To Tanks	Date of Test	Producing Method (Flow,	pump, gas lift, etc.)		
	Length of Test	Tubing Pressure	Casing Pressure	Cho	ce Size	· · · · · · · · · · · · · · · · · · ·	
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas	- MCF		
			<u> </u>				
	GAS WELL	······································	Bbls. Condensate/MMCF	Gra	vity of Condensate		
	Actual Prod. Test-MCF/D	Length of Test			te Size		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-				
V	I. CERTIFICATE OF COMPLIANCE		OIL C	ONSERVATIO	N COMMISSIO	N	
	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED OCT 2 11 . 19				
	I hereby certify that the rules and registrations that the information given Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY forry stepton				
	THE MAURICE L. BROWN COMPANY		TITLE	· · · · · · · · · · · · · · · · · · ·	tence with mill.	E 1104.	
	(Signature) Melvin J. Kleban		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation well, this form must be accompanied with RULE 111.				
	Administrator	arwa) Melvin J. Kleban	tests taken on the	tests taken on the well in acconduct the filled out completely for allo			
	(Title) May 6, 1975		able on new and recompleted waith 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				
	(Date)						
•			completed wells.				

REENED

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ULL CONSTRUCTION OF COMM. Helds, N. M.

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