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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

| | |
|--|---|
| Operator BTA Oil Producers | |
| Address 104 So. Pecos, Midland, Texas 79701 | |
| Reason(s) for filing (Check proper box) | Other (Please explain) |
| New Well <input type="checkbox"/> | Change in Transporter of: |
| Recompletion <input checked="" type="checkbox"/> | Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> |
| Change in Ownership <input type="checkbox"/> | Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> |

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|---------------|---|---|------------------|
| Lease Name Sunshine 695 Ltd. | Well No. 1 | Pool Name, Including Formation Wadla-Pennsylvanian Bough Permo-Penn | Kind of Lease State, Federal or Fee Fee | Lease No. N/A |
| Location Unit Letter <u>P</u> ; <u>990</u> Feet From The <u>South</u> Line and <u>330</u> Feet From The <u>East</u> Line of Section <u>14</u> Township <u>9-S</u> Range <u>35-E</u> , NMPM, <u>Lea</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"/> | Address (Give address to which approved copy of this form is to be sent) The Permian Corp. (trucks) Box 3119, Midland, Texas 79701 | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> | 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, give location of tanks. | Unit P | Sec. 14 | Twp. 9 | Rge. 35 | Is gas actually connected? No | When Approx. 45 days |

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 XX | Gas Well | New Well | Workover XX | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
| Date Spudded Re-entered 9-15-69 | Date Compl. Ready to Prod. 9-20-69 | | Total Depth 9651' | | P.B.T.D. 9650' | | | |
| Elevations (DF, RKB, RT, GR, etc.) 4117' G.L. | Name of Producing Formation Penn | | Top Oil/Gas Pay 9617' | | Tubing Depth 9618' | | | |
| Perforations 9618-34' | | | | | Depth Casing Shoe 9651' | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 15" | 10 3/4" | | 465' | | 450 sx | | | |
| 9 7/8" | 7 5/8" | | 4210' | | 1630 sx | | | |
| 6 3/4" | 5 1/2" | | 9651' | | 165 sx | | | |

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 Tanks 9-21-69 | Date of Test 9-24-69 | Producing Method (Flow, pump, gas lift, etc.) Flow | |
| Length of Test 24 hrs. | Tubing Pressure 275# | Casing Pressure Pkr. | Choke Size 26/64 |
| Actual Prod. During Test 808 | Oil-Bbls. 308 | Water-Bbls. 500 | Gas-MCF 308 |

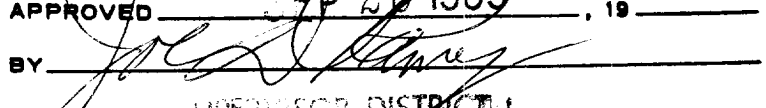
GAS WELL

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test-MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| Testing Method (pitot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size |

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.


(Signature)
Production Supt.
(Title)
September 25, 1969
(Date)

OIL CONSERVATION COMMISSION
APPROVED SEP 28 1969, 19
BY 
TITLE SUPERVISOR DISTRICT I

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 tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
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.