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U.S.G.S.			
LAND OFFICE			
IL.			
AS			
OPERATOR			
PRORATION OFFICE			
_	AS E		

November, 22, 1967
(Date)

	SANTA FE		FOR ALLOWABLE	Supersedes Old C-104 and C-110			
	FILE	_	AND	Effective 1-1-65			
	U.S.G.S.	AUTHORIZATION TO TRA	INSPORT OIL AND NATURAL	GAS			
	OIL						
	TRANSPORTER GAS						
	OPERATOR						
I.	PRORATION OFFICE  Operator						
	BTA Oil Produce	re					
	Address						
	104 South Pecos, Midland, Texas 79701						
	Reason(s) for filing (Check proper box)  Other (Please explain)						
	New Well Recompletion	Change in Transporter of: Oil X Dry Ga					
i	Change in Ownership	Casinghead Gas Conden	<del></del>				
	If change of ownership give name and address of previous owner						
II.	DESCRIPTION OF WELL AND Lease Name	Lease No.   Well No.   Pool Nar	me, Including Formation	Kind of Lease			
	VADA "B" 673 Ltd.	2 V	ADA PENN.	State, Federal or Fee FEE			
	Location						
	Unit Letter J; 19	80 Feet From The South Line	e and <u>1980</u> Feet Fron	n The <u>East</u>			
	20 -	0.6	. F. MADLE	I.ea County			
	Line of Section 20 To	ownship 9-S Range 34	-E , NMPM;	Lea County			
III.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	s				
	Name of Authorized Transporter of Oi	or Condensate	Address (Give address to which appl	roved copy of this form is to be sent;			
	Service Pipe Line Company Anoco Pipeline Co: 3411 Knoxville Ave., Lubbock, Texas 79413  Name of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is to be sent)						
	Warren Petroleum		Box 1589, Tulsa, Okla				
		Unit Sec. Twp. Rge.		When			
	if well produces oil or liquids, give location of tanks.	L 21 9-S 34-E	No				
	If this production is commingled wi	ith that from any other lease or pool,	give commingling order number:				
	COMPLETION DATA	Oil Weli Gas Well	New Well Workover Deepen	Plug Back   Same Resty. Diff. Resty.			
	Designate Type of Completi			1			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
	Perforations		<u>i.                                    </u>	Depth Casing Shoe			
	Periordions						
		TUBING, CASING, AND	CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
			-				
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a)	fter recovery of total volume of load of	il and must be equal to or exceed top allow-			
	Oll. WELL Date First New Oil Run To Tanks	able for this de	pth or be for full 24 hours)  Producing Method (Flow, pump, gas	lift, etc.)			
	Date First New Oil Mun .o Idnks	Date of Test	1				
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
			<u> </u>				
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gan-MCF			
	l						
	GAS WELL						
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
				Challes Com			
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size			
***	CERTIFICATE OF COMPLIAN	CE	OH CONSERV	ATION COMMISSION			
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERV	The Commission			
	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.			, 19			
	above is true and complete to the best of my knowledge and better.						
	$\alpha_{2}$	//		•			
	Joff Segment 1			n compliance with RULE 1104.			
	(Signature)			owable for a newly drilled or deepened panied by a tabulation of the deviation			
	Production	,	tests taken on the well in acc	cordance with RULE 111.			
		itle)	All sections of this form n	nust be filled out completely for allow- 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.