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| TRANSPORTER | OIL GAS |
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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 South Pecons, Midland, Texas 79701 | |
| Reason(s) for filing (Check proper box) | Other (Please explain) |
| New Well <input checked="" type="checkbox"/> | Change in Transporter of: |
| Recompletion <input 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

DESCRIPTION OF WELL AND LEASE

| | | | | | |
|--------------------------------------------------------------------------------------|----------------------|---------------|--------------------------------------------------------------------------------------------------|----------------------------------------|-------|
| Lease Name SOMICO 682 Ltd. | Lease No. OG 5085 | Well No. 1 | Pool Name, including Formation Simanota-Pennsylvanian Undesignated Penn. R-3411 | Kind of Lease State, Federal or Fee | State |
| Location Unit Letter C : 660 Feet From The North Line and 1980 Feet From The West | | | | | |
| Line of Section 20 Township 10-S Range 34-E , N.M.M., Lea County | | | | | |

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) | | | | |
| Admiral Crude Oil Corp. (Trucks) | P. O. Box 1713, 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. | P. O. Box 1589, Tulsa, Oklahoma 74102 | | | | |
| If well produces oil or liquids, give location of tanks. | Unit C | Sec. 20 | Twp. 10-S | Range 34-E | Is gas actually connected? No |

If this production is commingled with that from any other lease or pool, give commingling order number.

COMPLETION DATA

| | | | | | | | | |
|------------------------------------------------|----------------------------------------------|-----------------------------------|----------------------------------------------|-----------------------------------|---------------------------------|------------------------------------|---------------------------------------|---------------------------------------|
| Designate Type of Completion - (X) | Oil Well <input checked="" type="checkbox"/> | Gas Well <input type="checkbox"/> | New Well <input checked="" type="checkbox"/> | Workover <input type="checkbox"/> | Deepen <input type="checkbox"/> | Plug Back <input type="checkbox"/> | Stim. Resin. <input type="checkbox"/> | Diff. Resin. <input type="checkbox"/> |
| Date Spudded Jan. 27, 1968 | Date Compl. Ready to Prod. March 24, 1968 | | Total Depth 9985' | | P.B.T.D. 9961' | | | |
| Elevations (DF, RKB, RT, GR, etc.) 4230' GL | Name of Producing Formation Bough "C" | | Top Oil/Gas Pay 9947' | | Tubing Depth 9918' | | | |
| Perforations 9947' to 9954' | | | | | Depth Casing Shoe | | | |

TUBING, CASING, AND CEMENTING RECORD

| | | | |
|-----------|----------------------|-----------|--------------|
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| 17 1/2" | 12 3/4" | 367' | 375 SX. |
| 11" | 8 5/8" | 3820' | 400 SX. |
| 7 7/8" | 4 1/2" | 9985' | 300 SX. |
| | 2 3/8" | 9918' | |

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 allowable for this depth or be for full 24 hours)

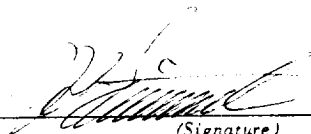
| | | | |
|---------------------------------------------------|--------------------------------|-------------------------------------------------------|---------------------|
| Date First New Oil Run To Tanks March 24, 1968 | Date of Test March 25, 1968 | Producing Method (Flow, pump, gas lift, etc.) Pump | |
| Length of Test 24 hrs. | Tubing Pressure ----- | Casing Pressure ----- | Choke Size ----- |
| Actual Prod. During Test 1017 | Oil - Bbls. 297 | Water - Bbls. 720 | Gas - MCF 132 |

GAS WELL

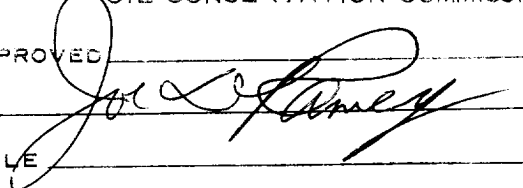
| | | | |
|----------------------------------|-----------------|----------------------|-----------------------|
| Actual Prod. Test - MCF/D | Length of Test | Bbls. Condensate/MCF | Gravity of Condensate |
| Testing Method (pitot, back pr.) | Tubing Pressure | Casing Pressure | Choke Size |

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.

| |
|-------------------------------------------------------------------------------------|
|  |
| Production Supt. |
| (Title) |
| March 28, 1968 |
| (Date) |

OIL CONSERVATION COMMISSION

| | |
|-----------------------------------------------------------------------------------------|----|
| APPROVED | 19 |
| BY  | |
| TITLE | |

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.