NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER OIL		
GAS		
OPERATOR		
PRORATION OFFICE		

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

I.

Operator

BTA Oil Producers

Address

104 South Pecos, Midland, Texas

Reason(s) for filing (Check proper box)

New Well [X]   Change in Transporter of:

Recompletion [ ]   Oil [ ]   Dry Gas [ ]

Change in Ownership [ ]   Casinghead Gas [ ]   Condensate [ ]

Other (Please explain)

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Lease No.	Well No.	Pool Name, Including Formation	Kind of Lease
Inbe 684 Ltd.	OG 2392	1	Undesignated Penn	State, Federal or Fee State

Vada-Pennsylvanian R-3662

Location

Unit Letter __G__ ; __1980__ Feet From The __North__ Line and __1980__ Feet From The __East__

Line of Section 36   Township 10-S   Range 33-E   , NMPM,   Lea   County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [ ] or Condensate [ ]	Address (Give address to which approved copy of this form is to be sent)
Pan American Petroleum Core (Trucks)	P. O. Box 3120, Midland, Texas 79701
Name of Authorized Transporter of Casinghead Gas [ ] or Dry Gas [ ]	Address (Give address to which approved copy of this form is to be sent)
Warren Petroleum	P. O. Box 1589, Tulsa, Oklahoma 74102

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	G	36	10S	33-E	NO	

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	XX		XX					

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
5-22-68	6-27-68	9975'	9956'

Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
4206' GL	Penn	9942'	9706'

Perforations		Depth Casing Shoe
9942' - 9950'		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17½"	12 3/4"	371'	375 sx
11"	8 5/8"	4009'	400 sx
7 7/8"	5 1/2"	9975'	300 sx
	2 3/8"		

V. TEST DATA AND REQUEST FOR ALLOWABLE (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)

OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
6-27-68	6-28-68	Flow	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs.	350#	Pkr.	28/64
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
416 bbls.	291	125	227

GAS WELL

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

6-28-68
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____ 1968 , is _____

BY _____

SUPERVISOR DISTRICT F

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.