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... ZW MEXICO OIL CONSERVATION COMMISSIO Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65 REQUEST FOR ALLOWABLE

Separate Forms C-104 must be filed for each pool in multiply completed wells.

H S C S		AND	
U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL	GAS
OIL			
TRANSPORTER GAS			
OPERATOR			
PRORATION OFFICE			
Operator	4		
BTA Oil Produc	ers		
Address			
104 South Pecc		79701	
Reason(s) for filing (Check proper box)	Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion	Oil Dry Ga		
Change in Ownership	Casinghead Gas Conder	nsate	
If change of ownership give name and address of previous owner			1 1 1 1
DESCRIPTION OF WELL AND	FASE		191
Lease Name	Lease No. Well No. Paol Na	me, Instituting Formation in R-381	8 Kind of Lease
Davis 687 Ltd.	1	IDESIGNATED - R 366	State, Federal or Fee Federal
Location	Midd	le Allison-Pennsylvania	
Unit Letter D ; 660	Feet From The North Lin	e and 660 Feet From	The West
Line of Section 9 Tov	vnship 95 Range	36E , NMPM,	Lea County
Name of Authorized Transporter of Oil	FER OF OIL AND NATURAL GA	Address (Give address to which appr	oved conv of this form is to be sent)
1			
The Permian Co		Box 3119, Midlar Address (Give address to which appr	oved copy of this form is to be sent
Warren Corpora			
	Unit Sec. Twp. Rge.	Box 1589, Tulsa, Is gas actually connected?	hen
If well produces oil or liquids, give location of tanks.	D 9 9S 36E		approx. 45 days
			upprox. 45 days
COMPLETION DATA	h that from any other lease or pool,	give comminging order number:	
	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
Designate Type of Completion	m - (X) XX	xx	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
11-8-68	12-17-68	9860'	9858 1
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
4093' KB	Bough "C"	9830 '	9806 '
Perforations	9836-48' w/2JSPF		Depth Casing Shoe
			9860'
		CEMENTING RECORD	240420545
HOLE SIZE	CASING & TUBING SIZE	375 '	SACKS CEMENT 375 SX
17 1/2	8 5/8"	4113'	400 sx
7 7/8"	5 1/2"	9860'	300 sx
	3 1/2		300 54
TEST DATA AND REQUEST FO	OP ALLOWARIE (Test must be a	iter recovery of total volume of load of	l and must be equal to or exceed top allow-
OIL WELL		pth or be for full 24 hours)	and mass of equation of exceed top arrow
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)
12-18-68	12-19-68	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs.			
Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF
1076	301	775	259
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Total - Mathed (piece back pr.)	Tubing Pressure	Casing Pressure	Choke Size
Testing Method (pitot, back pr.)	I ubing Fiessare	Cushing Pressure	Chore chief
		OH CONSERV	A TION COMMISSION
CERTIFICATE OF COMPLIANCE	CE	OIL CONSERV	ATION COMMISSION
		APPROVED	, 19
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		and the same	
above is true and complete to the best of my knowledge and belief.		BY SEMPLY	
		TITCE	
(IXIMMINI)		This form is to be filed in compliance with RULE 1104.	
(Signature)		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	
Production Superintendent		tests taken on the well in accordance with RULE 111.	
(Title)		All sections of this form must be filled out completely for allow-	
(Title) able on new and recompleted wells. December 23, 1968 Fill out only Sections I, II, III, and VI for changes of own.			
	ite)	well name or number, or transpo	rter, or other such change of condition.