	NO. OF COPIES RECEIVED			
	DISTRIBUTION			
	SANTA FE			
	FILE			
	u.s.g.s.			
	LAND OFFICE			
	TRANSPORTER	OIL		
		GAS		
	OPERATOR			
ı.	PRORATION OFFICE			

II.

II.

v.

NO. OF COPIES RECEIVED				
DISTRIBUTION	NEW MEXICO OF			
SANTA FE		NEW MEXICO OIL CONSERVATION COMMISSION		
FILE	REGUE	REQUEST FOR ALLOWABLE		
U.S.G.S.	ALITHOPIZATION TO T	AND	Effective 1-1-65	
LAND OFFICE	AUTHORIZATION TO	FRANSPORT OIL AND NATURA	L GAS	
TRANSPORTER OIL		·		
OPERATOR GAS	+			
PRORATION OFFICE	 			
Operator				
BTA Oil Prod	ducers			
Address				
104 South Pe	ecos Midland, Texas	: 79701		
Reason(s) for filing (Check proper		Other (Please explain)		
New Well	Change in Transporter of:	omer (1 sease explain)	,	
Recompletion	Oil Dry	/ Gas		
Change in Ownership		ndensate		
If change of ownership give nam and address of previous owner _				
DESCRIPTION OF WELL A	ND LEASE	$t \rightarrow t$		
Lease Name	Well No. Pool Name, Including		Lease No.	
Ray 700 JV	2 Vada-Pen	State, Fed.	eral or Fee Fee	
Location				
Unit Letter H ; 19	980 Feet From The North	Line and 510 Feet Fre	m The East	
,,		reet rio	m The East	
Line of Section 15	Township 9-S Range	35-E , NMPM, Lea	County	
		<u> </u>	County	
DESIGNATION OF TRANSPO	ORTER OF OIL AND NATURAL	GAS		
Name of Authorized Transporter of			proved copy of this form is to be sent)	
Mobil Pipe Line	co.	P. O. Box 900 D	allac movac 75221	
Name of Authorized Transporter of	Casinghead Gas X or Dry Gas		roved copy of this form is to be sent)	
Warren Pet. Cor	. מ'	P O Box 1589 m	ulsa, Oklahoma 74100	
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	When	
give location of tanks.		E No A	pprox. 45 days	
f this production is commingled	with that from any other lease or poo		, pp_10.1.1 10 dd/5	
COMPLETION DATA		and the second s		
Designate Type of Comple	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.	
2-4-70	4-6-70	9820'	9818'	
Elevations (DF, RKB, RT, GR, etc	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
4152 KB	Bough "C"	9780'	9801'	
Perforations			Depth Casing Shoe	
9781-9803	w/2 JSPF		9820'	
	TUBING, CASING, A	ND CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
17 1/2"	12 3/4"	375'	375 (circulated)	
11"	8 5/8"	4066'	400	
<u>7 7/8"</u>	5 1/2"	9820'	300	
EST DATA AND REQUEST	FOR ALLOWABLE (Test must be	after recovery of total volume of load of	l and must be equal to or exceed top allow-	
OIL WELL	able for this	depth or be for full 24 hours)	•	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)	
4-16-70	4-17-70	Pump		
ength of Test	Tubing Pressure	Casing Pressure	Choke Size	
24 hrs. Actual Prod. During Test				
	Oil-Bbls.	Water - Bbls.	Gas - MCF	
321	155	166	139	
AS WELL	11		· · · · · · · · · · · · · · · · · · ·	
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
Continue Matheway (mineral land)	Trade Park Control			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
		<u> </u>		
ERTIFICATE OF COMPLIA	NCE	OIL CONSERV	ATION COMMISSION	
		APR 3	0.1070	

I. C

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 Manager (Title)

4-28-70

(Date)

Geologist 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



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OIL CONSEGNATION CO.M.