NO. OF COPIES RECE	IVEO	i .	
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			

-  -  -	DISTRIBUTION SANTA FE FILE		NSERVATION COMMISS OR ALLOWABLE AND	ION Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65	
ŀ	U.S.G.S.	TURAL GAS			
I	LAND OFFICE	No months in the contract of t			
	TRANSPORTER GAS GAS				
İ	OPERATOR				
1.	PRORATION OFFICE				
-	Operator				
	BTA Oil Producer	s			
- [	Address				
	104 South Pecos	Midland, Texas	7970] Other (Please ex	plais)	
	Reason(s) for filing (Check proper box)	m t- mantar afa	Other (1 seese ex	,	
	New Well	Change in Transporter of: Oil Dry Gas			
	Recompletion	<b>=</b> = 1.			
	Change in Ownership	Casinghead Gas Condens	ide LJ		
	If change of ownership give name and address of previous owner				
	DECOMPOSON OF WELL AND I	FACE	*		
ш.	DESCRIPTION OF WELL AND L	Well No. Pool Name, Including Fo		ind of Lease No.	
	703 JV-D	1 Vada-Penn	S	ote, Federal or Fee Federal 058311	
60	Location	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
	м 661	O Feet From The South Line	and 810	Feet From The West	
	Unit Letter M ; OO			-	
	Line of Section 9 Town	nship 9–S Range 35	<u>-Е</u> , <b>ммрм</b> ,	Lea County	
III.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	S		
	Name of Authorized Transporter of Oil	or Condensate	Address (Give datess to	which approved copy of this form is to be sent)	ı
	Mobil Oil Corp. (Tr		Box 900, Dall	as, Texas 75221	ı
	Name of Authorized Transporter of Cast	Inghead Gas X or Dry Gas	Address (Give address to which approved copy of this form is to be sent)		
	Warren Petroleum Co	rp.	Box 1589, Tul		
	If well produces oil or liquids,	Unit Sec. Twp. P.ge.		Approx. 45 days	l
	give location of tanks.	M	No .		
	If this production is commingled with	h that from any other lease or pool,	give commingling order r	umber:	
IV.	COMPLETION DATA		New Well Workover	Deepen Plug Back Same Res'v. Diff. Res'v.	ĺ
	Designate Type of Completion	n - (X) $XX$	xx		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	4-17-70	5-23-70	9865	9863	ĺ
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	ĺ
	4187 KB	Bough "C"	9839	9848	ĺ
	Perforations			Depth Casing Shoe	
		2 w/2 - 1/2" JSPF		9865	
		TUBING, CASING, AND	CEMENTING RECORD		ł
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SE		l
	17 1/2"	12 3/4"	380'	375 (circulated)	ı
	11"	8 5/8"	4073'	400	ł
	7 7/8"	5 1/2"	9865 <b>'</b>	300	1
v	. TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	fter recovery of total volumenth or be for full 24 hours)	e of load oil and must be equal to or exceed top allow	
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow.	pump, gas lift, etc.)	1
			<b>1</b> 2	·	
	5-24-70	5-29-70 Tubing Pressure	Pump Casing Pressure	Choke Size	1
	Length of Test	I mound Presente			١
	24 hrs.	Oil-Bbls.	Water-Bbls.	Gas-MCF	1
	Actual Prod. During Test	1	1300	151	J
	1561	261	1 1300		
	CAC WET T				_
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	١
		Tubing Pressure (shut-in)	Casing Pressure (Shut-	in) Choke Size	-
	Testing Method (pitot, back pr.)	I don't Francisco ( State-Tm )			ل
V	. CERTIFICATE OF COMPLIAN	ATE OF COMPLIANCE		ONSERVATION COMMISSION	
				JUN 3 1970 19	_
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.			APPROVED		
			BY	The state of the s	_
	ROOMS IS THE SUG COMPLETE TO THE			ISOR DISTRIC'	
	a of		TITKE		_
	ぐかが		This form is to	be filed in compliance with RULE 1104.	

6-1-70

bave is true and complete to the best of my minutes	
$\mathcal{M}$	
SHAMMIN STATE	
(Signature)	
- 1. Thian Manager	
Production Manager	_
(Title)	

(Date)

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

JUN2 1970
OIL CONSERVATION COMM. HOBBS, N. II.