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U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			

(Title)

(Date)

12/2/74

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-110 Effective 1-1-65 AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS PRORATION OFFICE Operator BTA Oil Producers Address Pecos 104 S. Midland, Texas 79701 Reason(s) for filing (Check proper box) Other (Please explain) Change in Transporter of: X Recompletion Dry Gas Change in Ownership Casinghead Gas Condensate If change of ownership give name and address of previous owner ____ II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Kind of Lease Lease No. State, Federal or Fee Brewer 689-C Ltd. North Bagley (Penn) Fee Unit Letter "F" 1880 Feet From The North Line and 2080 Feet From The West Township 12-S , NMPM, Line of Section Range 33-ECounty Address (Live address to which approved copy of this form is to be sent)
2300 Continental National Bank Bldg. Amoco Pipeline Company
Name of Authorized Transporter of Casinghead Gas X Ft. Worth, Texas 76102
Address (Give address to which approved copy of this form is to be sent) or Dry Gas Box 1589 Warren Petroleum <u>Tulsa, Oklahoma</u> 74101 Unii Twp. is gas actually connected? If well produces oil or liquids, give location of tanks. 12S May, 1974 33F Yes If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Workover Oil Well Ggs Well New Well Piug Back Same Res'v. Diff. Res'v. Designate Type of Completion - (X) Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D. Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth Perforations Depth Casing Shoe TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE SACKS CEMENT 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.) Length of Test Tubing Pressure Casing Pressure Actual Prod. During Test Oil-Bbls. Water - Bbls. Gas - MCF **GAS WELL** Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION F 1974 APPROVED_ I hereby certify that the rules and regulations of the Oil Conservation Orle Stened by Commission have been complied with and that the information given above is true and complete; to the best of my knowledge and belief. Joe D. Pamey Disc. 1, Supv. This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. Prod. Foreman R. D. Boyce

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