NO. OF COPIES RECT	EIVED	İ	
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL	L	
	GAS		
OPERATOR			

9-23-74

(Date)

	SANTA FE		ONSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-110		
	FILE	KEQUE31	FOR ALLOWABLE AND	Effective 1-1-65		
	U.S.G.S.	AUTHORIZATION TO TRA	INSPORT OIL AND NATURA	I CAS		
	LAND OFFICE	AUTHORIZATION TO TRA	INSI OKT OIL AND NATOKA	LUAS		
	OIL					
	TRANSPORTER GAS					
	OPERATOR					
1.	PRORATION OFFICE					
	Operator					
	BTA Oil Producers					
	Address					
	104 South Pecos		79701			
	Reason(s) for filing (Check proper box)		Other (Please explain)			
	New Well	Change in Transporter of:	<u></u>			
	Recompletion	Oil Dry Ga	—			
	Change in Ownership	Casinghead Gas Conden	asate			
	If change of ownership give name	71100 1000				
	and address of previous owner	THIS WELL HAS BEEN P	LACED IN THE POOL			
		DESIGNATED BELOW. IF NOTIFY THIS OFFICE.	ANY DO NOT CONCUR			
II.	DESCRIPTION OF WELL AND	Well No. Pool Name, Including F	ormation 0 10/1 Kind of L	ease Lease No.		
	Lease Name	<u> </u>	N-4001			
	Brewer 689-C Ltd.	4 North Bagley	(Penn)	deral or Fee NA		
	Location		•••	***		
	Unit Letter ''F'' ; 18	80 Feet From The North Lin	e and 2080 Feet Fr	om The West		
				•		
	Line of Section 6 Tov	vnship 12-S Range	33-E , NMPM,	Lea County		
			S			
III.	Name of Authorized Transporter of Oil	TER OF OIL AND NATURAL GA	Address (Give address to which a	oproved copy of this form is to be sent)		
	The Permian Corpora Name of Authorized Transporter of Cas	singhead Gas (A) or Dry Gas	Box 1183 Hous	proved copy of this form is to be sent)		
	Warren Petroleum	singliedd dde Zz	II.	a, Oklahoma 74101		
	Warren Petroleum	Unit Sec. Twp. Rge.	Is gas actually connected?	When		
	If well produces oil or liquids, give location of tanks.	C 6 12S 33E	Yes	1		
		, <u> </u>	. 	·		
		th that from any other lease or pool,	give commingling order number:			
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deeper	Plug Back Same Res'v. Diff. Res'v.		
	Designate Type of Completic		\mathbf{x}	1 1 1		
		Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Date Spudded	9-19-74	10, 450'	10, 432'		
	8-2-74 Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
		•	9.149'	8.462'		
	4311' KB 4301' GL	Pennsylvanian	/, **/	Depth Casing Shoe		
	9149' - 10, 394'			8, 462'		
	7147 - 10,371	TUBING CASING AND	CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	17-1/2"	13-3/8"	3891	375 sx (circ)		
	11"	8-5/8"	3, 725'	400 sx		
	7-7/8"	5-1/2"	10,450'	800 sx		
	1-170					
٠,	TEST DATA AND REQUEST F	OP ALLOWARIE (Test must be a	fter recovery of total volume of load	oil and must be equal to or exceed top allow-		
٧.	OIL WELL	able for this de	epth or be for full 24 hours)			
	Date First New Oil Run To Tanks	Date of Test 9-22-74	Producing Method (Flow, pump, go	is lift, etc.)		
	9-19-74	EXCEPTION	Pump			
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	24 hrs.			40 40		
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas - MCF		
		411	583	263		
	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 COMPLIAN	CE	GIL CONSER	RVATION COMMISSION		
4 1.	CLAVEL COME DING	-		1974		
	I have by partify that the suize and	regulations of the Oil Conservation	APPROVED	, 19		
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		AV STANDA			
above is true and complete to the best of my knowledge and belief.		BY / A				
		\circ	TITLE SUPER	VISOR DISTRICT I		
L. D. Boyce			1			
			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			
	(Signature)		tests taken on the well in accordance with RULE 111.			
	Prod. Foreman	R. D. Boyce	All sections of this form	n must be filled out completely for allow-		
	(Title)		able on new and recomplete	d Wells.		

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

	-	
FIELD North Bagley (Penn)	COUNTY Lea	OCC NUMBER
OPERATOR BTA 011 Producers	, ADDRESS	104 South Pecos Street, Midland, Texas 79701
LEASE 689-C LTD. Brewer	WELL NUMBER 4	SURVEY 1,880' FNL & 2080' FWI
Section 6, T-12-S, R-33-E		
	RECORD OF IN	CLINATION
	DEPTH (FEET)	ANGLE OF INCLINATION (DEGREES)
	389 86 5	1
	1,350	1
	1,836 2,216	3/4 1
	2,700 2,945	1
	3,430 3,725	3/4 3/4
	4,444 4,571	1
	5,06 5 5,536	1

1

1

1

1

3/4

3/4

3/4

1/2

3/4

3/4

Certification of personal knowledge Inclination Data:

6,000 6,485 6,775

6,959

7,400

7,895

7,916

8,400 8,700

9,117

9,665

10,150

10,450

I hereby certify that I have personal knowledge of the data and facts placed on this form, and that such information given above is true and complete.

roim, and that such information giv	en above is true and complete.
	HONDO DRILLING COMPANY
	BY: Mille John
were a second	Walter Frederickson Vice President
Sworn and subscribed to	before me the undersigned authority, on this the10th
day of <u>September</u> , 1974.	
Margaret D. Longanecker	Notary Public in and for <u>Midland</u> County, Texas.