	1		-			
NO. OF COPIES RECEIVED						
ÚISTRIBUTION SANTA FE		NEW MEXICO OIL CONSERVATION COMMISSION				
	REQUEST	Supersedes Old C-104 and C-110 Effective 1-1-65				
U.S.G.S.	AND Lineare 19765					
	AUTHORIZATION TO TRA	NSPURT UIL AND NA	ATURAL G	A3		
	4					
TRANSPORTER GAS						
OPERATOR	1					
PRORATION OFFICE						
Operator	· · · · · · · · · · · · · · · · · · ·			S MUST NOT H		
BTA Oil Producers			AFIER .			
Address			AN EXCI	EPTION TO R-4070		
104 South Pecos	Midland, Texas	79701 IS OBTA				
Reason(s) for filing (Check proper box		Other (Please e	xplain)			
New Well	Change in Transporter of:					
Recompletion		$ H$ $( \setminus \mu )$	. 1	Off a sit and		
Change in Ownership	Casinghead Gas Conden	isate		1 S a D & BMAC		
If change of ownership give name	THIS WELL HAS BEEN	PLACED IN THE POOL	I.			
and address of previous owner	THIS WELL HAS BEEN	F YOU DO NOT CONCU	R			
	NOTIFY THIS OFFICE					
II. DESCRIPTION OF WELL AND	Well No. Pool Name, Including Fo		ind of Lease	Lease No.		
			itate, Federal	_		
Hugh 689-C	<u> </u>	F Penn				
		F 4 0		. East		
Unit Letter;;	2080 Feet From The <u>South</u> Lin	e and 20U	Feet From T	he <u>Last</u>		
Line of Section 6 To	waship 12-S Range	33-Е , ммрм,		Lea County		
Line of Section D To	wiship 12-5 Runge	JJ-1, , IMPM,	<u> </u>			
III. DESIGNATION OF TRANSPOR	TED OF OU AND NATURAL GA	c				
Name of Authorized Transporter of Oli	X or Condensate	Address (Give address to	which approve	ed copy of this form is to be sent) al Bank Bldg.		
Amoco Pipeline Com		2300 Continenta	al Nation	al Bank Bldg. as 76102		
Name of Authorized Transporter of Ca	singhead Gas X or Dry Gas	Address (Give address to	which approve	ed copy of this form is to be sent)		
		Box 1589 7		klahoma 74101		
Warren Petroleum Co	Unit Sec. Twp. Ege.	Is gas actually connected				
If well produces oil or liquids, give location of tanks.	I 6 12-S 33-E	no	a	pprox. 30 days		
	th that from any other lease or pool,					
It this production is commingled with IV. COMPLETION DATA	th that from any other lease of pool,	Five comminging order .				
	Oil Well Gas Well	New Well Workover	Deepen	Plug Back Same Res'v. Diff. Res'v.		
Designate Type of Completi	$\operatorname{on} - (X)$   X		1			
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.		
9/10/74	10/27/74	10,400'		10,363'		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth		
4294' GR	Penn	9225'		10,400'		
Perforations				Depth Casing Shoe		
9225' - 10, 331'				10,400		
	TUBING, CASING, AND	CEMENTING RECORD				
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	r	SACKS CEMENT		
17-1/2"	12-3/4"	380'		400 (circ)		
11''	8-5/8"	3,730'		450		
7-7/8"	5-1/2"	10,400'		800		
		<u>j                                    </u>		<u> </u>		
V. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of total volum pth or be for full 24 hours)	e of load oil a	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, sas lift	t. etc.)		
10/28/74	10/28/74 Tubing Pressure	Pump Casing Pressure		Choke Size		
Length of Test	·			· · · · · · · · · · · · · · · · · · ·		
24 hrs. Actual Prod. During Test	Oil-Bbls.	Water - Bbis.		Gas-MCF		
Actual Front During Test				575		
<u> </u>	436	620				
CAS WELL						
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF		Gravity of Condensate		
Actual ( 1001 1001 Mol / D						
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-	<b>ln</b> )	Choke Size		
Tracting Manuar (burn) and a but		•				
	CF		ONSERVA	TION COMMISSION		
VI. CERTIFICATE OF COMPLIAN			1 A.			

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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.

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<u> HU TTIIIII L</u>	(Sil	natur	e)
Production Supt.	- J.	R.	Stimmel
	0	Title)	

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10/29/74

(Date)

AF e BY ASTRICT I TITLE <u>Uri</u> SUPERVI

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 allow-able 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 completed wells.

FIELD N. Bagley (L)Penn CO' Y Lea	
OPERATOR BTA 011 Producers ,ADDRESS 104 Sout	h Pecos Street, Midland, Texas 79701
LEASE 689-C Hugh #1 WELL NUMBER 1 S	URVEY 560' FSL & 2.080' FEL, T-125, B-33F

	ANGLE OF
DEPTH (FEET)	INCLINATION (DEGREES)
380*	3/4
850*	3/4
1,344*	1
1,800'	1
2,300'	1 1
2,775'	3/4
2,991'	3/14
3,491'	3/4
3,725*	3/4
4,096'	3/4
4,570*	3/4
5,035*	3/4
5,500'	1
5,995'	1 1 1 1
6,385*	1
6,480'	l
6,822'	3/4
7,300'	1
7,780'	1
7,985'	1
8,465'	1
8,700'	1
9,180'	1
9,650*	
9,925*	1
10,400'	1

RECORD OF INCLINATION

Certification of personal knowledge Inclination Data:

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.

HONDO DRILLING COMPANY
By:
Walter Frederickson

Vice President

Sworn and subscribed to before me the undersigned authority, on this the

\_\_\_\_\_ day of \_\_\_\_\_\_, 1974.

Joyee	u ZU	had_	_Notary	Public	in an	d for	Midland	County,	Texas.
V SUYER	W 5000								