

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator BTA Oil Producers	Well API No. 30-025-31061
Address 104 S. Pecos, Midland, TX 79701	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Recompletion <input type="checkbox"/>	
Change in Operator <input type="checkbox"/>	
If change of operator give name and address of previous operator _____	

CASINGHEAD GAS MUST NOT BE
FLARED AFTER 3-16-91
UNLESS AN EXCEPTION TO R. 4070
IS OBTAINED.

II. DESCRIPTION OF WELL AND LEASE

Lease Name Sunray -A-, 6822 Ltd	Well No. 3	Pool Name, Including Formation Lane (San Andres)	Kind of Lease State, Federal or Fee	Lease No. L-332
Location Unit Letter <u>G</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>East</u> Line Section <u>36</u> Township <u>9S</u> Range <u>33E</u> , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Phillips Petroleum Co., Trucks	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, Odessa, TX 79762					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Co.	Address (Give address to which approved copy of this form is to be sent) P.O.Box 1589, Tulsa, OK 74102					
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 36	Twp. 9S	Rge. 33E	Is gas actually connected? No	When? Est 1-24-91

If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well XXX	Gas Well	New Well XXX	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 12-29-90	Date Compl. Ready to Prod. 1-15-91		Total Depth 4760		P.B.T.D. 4721			
Elevations (DF, RKB, RT, GR, etc.) 4278' GR 4291' RKB	Name of Producing Formation San Andres		Top Oil/Gas Pay 4638		Tubing Depth 4595			
Perforations 4638-4646					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE 12-1/4	CASING & TUBING SIZE 8-5/8		DEPTH SET 525		SACKS CEMENT 300 sx			
7-7/8	5-1/2		4760		975 sx - TOC @ 990			

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (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.)			
Date First New Oil Run To Tank 1-16-91	Date of Test 1-16-91	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs	Tubing Pressure ---	Casing Pressure ---	Choke Size ---
Actual Prod. During Test 88 bbls	Oil - Bbls. 88 bbls	Water - Bbls. 165	Gas- MCF 13

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature Dorothy Houghton
Printed Name Dorothy Houghton, Regulatory Administrator
Date 1-22-91 Telephone No. 915-682-3753

OIL CONSERVATION DIVISION

Date Approved JAN 24 1991
By _____
Title _____

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.