Ш.

IV.

NO. OF COPIES REC	EIVED	İ	
DISTRIBUTION			
SANTA FE			
FILE			
u.s.g.s.			
LAND OFFICE			
TRANSPORTER	OIL		
	G A S		
OPERATOR			
		1	

			ONSERVATION COMM FOR ALLOWABLE	Form C-104 Supersedes Old (	Form C-104 Supersedes Old C-104 and C-116								
	FILE				Effective 1-1-65								
	U.S.G.S.	AUTHORIZATION TO TRA		NATURAL GAS									
	LAND OFFICE												
	TRANSPORTER OIL												
	GAS												
	OPERATOR DESIGN												
I.	PRORATION OFFICE Operator		<del></del>		<del></del>								
	BTA Oil Producers	<b>,</b>		<del></del>	<del></del>								
	104 So. Pecos. Mi	dland, Texas 79701											
	Reason(s) for filing (Check proper box)	diana, lexas 79701	Other (Please	explain)									
	New Well	Change in Transporter of:	THIS WELL	HAS BEEN DING	ICA GU FUS RALI								
	Recompletion  Change in Ownership	<b>-</b>	THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR Inghead Gas Condensate NOTIFY THIS OFFICE.										
	If change of ownership give name		<u> </u>		<del>-</del>								
_	and address of previous owner		1 1 2046		<del></del>								
Ц.	DESCRIPTION OF WELL AND I Lease Name	Well No. Pool Name, Including F	/ R-3895 ormation	Kind of Lease		Lease No.							
	Option 694 Ltd.	3 <del>Undesignated</del>	l-Penn	State, Federal or	<sup>F</sup> Federal	NM 4039							
	Location			<u> </u>									
	Unit Letter M ; 66	O Feet From The South Lin	e and 660	Feet From The _	West								
					_								
	Line of Section 35 Tow	mship 8-S Range	35-Е , имри	, Rooses	velt	County							
***	DECICNATION OF TRANSPORT	PED OF OU AND NATURAL CA	c										
ш.	Name of Authorized Transporter of Oil		Address (Give address	to which approved (	copy of this form is to	be sent)							
	Mobil Pipe Line Co	mnany	Box 900 Da	llas Texa	as 75221								
	Name of Authorized Transporter of Cas	inghead Gas C or Dry Gas	Box 900, Da Address (Give address	to which approved o	copy of this form is to	be sent)							
	Warren Petroleum C	orp.	Box 1589, T	ulsa, Okla	ahoma 741 <b>0</b>	0							
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connect			-							
	give location of tanks.	M 35 8 35	No	Appı	rox. 45 day	s							
	If this production is commingled wit	h that from any other lease or pool,	give commingling orde	r number:									
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover	Deepen Pl	lug Back   Same Res's	v. Diff. Res'v.							
	Designate Type of Completio	on - (X) XX	l xx		1								
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.	B.T.D.								
	9-24-69	10-19-69	9810'	ļ	9763 <b>'</b>								
		Name of Producing Formation	Top Oil/Cas Pay		ubing Depth								
	4155' G.L.	Bough "C"	9778'		<u>9727 '</u>								
	Perforations			De	epth Casing Shoe								
	978	1-96' w/2JSPF			9810'								
		TUBING, CASING, AND	T		CACKE OF U	<del>.</del>							
	HOLE SIZE	CASING & TUBING SIZE	386'	= 1	375 sx (C								
	17-1/2" 11"	8-5/8"	4030'		400 sx	110.)							
	7-7/8"	5-1/2"	9810'		300 sx								
v.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	fter recovery of total volu	ime of load oil and	must be equal to or ex	ceed top allow-							
•	OIL WELL	able for this de	pth or be for full 24 hour.	<b>s)</b>									
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow	_	ic.)								
	11-5-69 Length of Test	11-7-69 Tubing Pressure	Casing Pressure	Pump	hoke Size								
	_ •	Tubing Pleasure			-								
	Actual Prod. During Test	Oil-Bbla.	Water - Eibls.	G	as-MCF								
	1175	275	900	1	<b>2</b> 50								
	111/5	1 2/3	<u> </u>										
	GAS WELL												
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMC	F G	ravity of Condensate								
			2	10	h-1 81								
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut	<b>-18</b> )	hoke Size								
				2015:5714 71	0) 001445000	<del></del>							
VI.	CERTIFICATE OF COMPLIANCE	CE	OIL	CONSERVATIO	ON COMMISSION								
			APPROVED A 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.			402										
			BY TO THE STATE OF										
		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 allowable on new and recompleted wells.											
(Signifue)  Production Supt.  (Title)													
							November 10,	1969	Fill out only	Sections I. II. II	II. and VI for chang	ges of owner,	
								ate)	well name or number, or transporter, or other such change of condition.				

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. Senarate Forms C-104 must be filed for each pool in multiply