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| DISTRIBUTION | | | |
| SANTA FE | | | |
| FILE | | | |
| U.S.G.S. | | | |
| LAND OFFICE | | | |
| TRANSPORTER | OIL | | |
| | GAS | | |
| OPERATOR | | | |
| BEODATION OFFICE | | | |

Production Manager

10-2-70

(Title)

(Date)

| | DISTRIBUTION | | | | | | |
|--|--|--|---|---------------------------------------|--|--|--|
| | SANTA FE | | CONSERVATION COMMIS 4 | Form C-104 | | | |
| FILE | | REQUEST | REQUEST FOR ALLOWABLE | | | | |
| | } | - | AND | Effective 1-1-65 | | | |
| | U.S.G.S. | _ AUTHORIZATION TO TRA | ANSPORT OIL AND NATURAL (| GAS | | | |
| | LAND OFFICE | | | | | | |
| | TRANSPORTER GAS | _ | | | | | |
| | OPERATOR | 7 | | | | | |
| | PRORATION OFFICE | 7 | | | | | |
| •• | Operator | <u> </u> | | | | | |
| | RTA Oil Brod | ugowa | | | | | |
| | BTA Oil Producers | | | | | | |
| | 104 South Pe | cos, Midland, Texas | 79701 | | | | |
| | eason(s) for filing (Check proper box) Other (Please explain) | | | | | | |
| | New Well | Change in Transporter of: | THIS WELL HIS BOTH | FLACED IN THE HOOK | | | |
| | Recompletion | Oil Dry Go | | T YOU DO HOT LONGUR | | | |
| | Change in Ownership Casinghead Gas Condensate C | | | | | | |
| | If change of ownership give name | | | | | | |
| | and address of previous owner | | | | | | |
| 11. | DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation 2 Kind of Lease Lease No. | | | | | | |
| | Pickens 707 JV-D | 1 Baum-Upper | R-4061 | | | | |
| | Location | 80 Feet From The South Lir | 660 | Wort | | | |
| | | | _ | The <u>West</u> | | | |
| | Line of Section 11 To | ownship 14-S Range 3 | 2-E , ммрм, Lea | County | | | |
| III. | DESIGNATION OF TRANSPOR | TER OF OIL AND NATURAL GA | Address (Give address to which appro | and copy of this form is to be seen | | | |
| | | | | • | | | |
| | The Permian Corp. Name of Authorized Transporter of Ca | singhead Gas or Dry Gas | Box 3119, Midland, Address (Give address to which appro | Texas 79701 | | | |
| | } | | | | | | |
| | Warren Petroleum | | Box 1589, Tulsa, Oklahoma 74100 | | | | |
| | If well produces oil or liquids, | Unit Sec. Twp. Rge. | Is gas actually connected? Wh | | | | |
| | give location of tanks. | L 11 14-S 32-E | No A | pproximately 45 days | | | |
| IV. | If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA | | | | | | |
| | Desired Torre of Complete | Otl Well Gas Well | New Well Workover Deepen | Plug Back Same Res'v. Diff. Res'v. | | | |
| | Designate Type of Completi | on = (X) XX | 1 XX | | | | |
| | Date Spudded | Date Compl. Ready to Prod. | Total Depth | P.B.T.D. | | | |
| | 8-15-70 | 9-24-70 | 9950 | 9915 | | | |
| | Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | Top Oil/Gas Pay | Tubing Depth | | | |
| | 4315 KB | Upper Penn | 9848 | 9861 | | | |
| | Perforations | | | Depth Casing Shoe | | | |
| | 9848-84 9888-92 | w/2 TCDE | | 9950 | | | |
| | 3040 04, 3000 32 | 9848-84, 9888-92 w/2 JSPF 9950 TUBING, CASING, AND CEMENTING RECORD | | | | | |
| | HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | 1 2.2 | | | |
| | | | | SACKS CEMENT | | | |
| | 17-1/2" | 12-3/4" | 380 | 350 (circulated) | | | |
| | 11-1/2" | 8-5/8" | 4010 | 300 | | | |
| | 7-7/8" | 5-1/2" | 9950 | 300 | | | |
| v. | 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 death or he for full 24 hours.) | | | | | | |
| | OII. WEI.I. able for this depth or be for full 24 hours) Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.) | | | | | | |
| | | | | , . | | | |
| | 9-25-70 | 10-1-70 | Pump | | | | |
| | Length of Test | Tubing Pressure | Casing Pressure | Choke Size | | | |
| | 24 hrs. | - | | _ | | | |
| | Actual Prod. During Test | Oil-Bbls. | Water-Bbls. | Gae - MCF | | | |
| | | 348 | 734 | <u> </u> | | | |
| | GAS WELL | | | | | | |
| | Actual Prod. Test-MCF/D | Length of Teet | Bbls. Condensate/MMCF | Gravity of Condensate | | | |
| | , <u></u> | | | order, or odinament | | | |
| | Testing Method (pitot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size | | | |
| | | | | <u></u> | | | |
| VI. | CERTIFICATE OF COMPLIAN | CE | OIL CONSERVA | TION COMMISSION | | | |
| | | | Jane Jane | J/U | | | |
| 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. | | | APPROVED | , 19 | | | |
| | | | BY John W. Rungar | | | | |
| | | | | | | | |
| | | | TITLE | | | | |
| | $\mathcal{L} = \mathcal{L} \mathcal{L} \mathcal{L}$ | : | This form is to be filed in | compliance with RULE 1104. | | | |
| | - W. Lebert | | NI . | vable for a newly drilled or deepened | | | |
| | (Signature) | | well, this form must be accompa | nied by a tabulation of the deviation | | | |

tests taken on the well in accordance with MULE 111.

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

RECEIVED

UDT - 6 1970

OIL CONSERVATION COMM. HOBBS, N. JM.