

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepe well, this form must be accompanied by a tabulation of the devia tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all able on new and recompleted wells.

Fill out only Sections I. II. III, and VI for changes of ow: well name or number, or transporter, or other such change of condit

Separate Forms C-104 must be filed for each pool in mult

STATE OF NEW MEXICON	ACAIT.		
ENERGY AND MINERALS DEPARTN	TENT		Form C-104
OISTAIBUTION			Revised 10-01-78
SANTA PE	OIL CONSERVATION DIVISION		Format 06-01-83 Page 1
FILE	9 O BOY 1000		
V.S.G.S.	SANTA FE, NEW MEXICO 87501 /11/ 72= 20 20		
LANG OFFICE		· · · · · · · · · · · · · · · · · · ·	J.
TRANSPORTER GAS	DEOLECT CO	Distance Miss	Ve =2160
OPERATOR		OR ALLOWABLE // //	
PROBATION OFFICE			:
I.	AUTHORIZATION TO TRANS	PORT OIL AND NATURAL G	13
Operator		· · · · · · · · · · · · · · · · · · ·	
BTA OIL PRO	DUCERS		U
Address			
104 South P	ecos Midland, Te	xas 79701	
Reason(s) for filing (Check proper t		Other (Please explain	
X New Well	Change in Transporter of:		
Recompletion		ry Gas A NOW G WILLIAM	CAR RELEASE NOW THE
Change in Ownership		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	33. 1 - 1 - 1
Change in Consersation	Castnghead Gas C	andensate	NECET TONE TO RAME
f change of ownership give name	,	AS CHRADIBL	:
	T) (
I. DESCRIPTION OF WELL A	ND LEASE $1/-4$		
Lease Name Well No. Pool Name, including Formation		ormation Kind of	Lease Lease
Hartley, 8609 JV-P 1 King, Wolfcamp		State, F	Federal or Fee Fee
Location			
I 16	650 Feet From The South Lin	ne and 330 Feet	Fact
Unit Letter : 1	rest from the God off	Feet	From The East
Line of Section 26	Cownship 13-S Range 3	37-E , NMPM,	100
Cine of Section 20	FOIT Fragge Corn		Lea co
III DESIGNATION OF TRAN	EOTT Energy Corp.	. =	z mansportation oo.
III. DESIGNATION OF TRAN	SPORTER OFFICIALITY NATURAL		Sport 1884 c Effective: Topos to be sent,
Tanama Conda O:7 0		1	
lesoro Crude 01 Cor		P. O. Box 17536, S.	
Name of Authorized Transporter of C	Casinghead Gas or Dry Gas	Address (Cive address to which	approved copy of this form is to be sent,
If well produces oil or liquids,	Unit Sec. Twp. Rge.	is gas actually connected?	When
give location of tanks.	<u> </u>	No	·
f this production is commingled	with that from any other lease or pool,	give commingling order number	·•
NOTE: Complete Parts IV and	d V on reverse side if necessary.		
T CERTIFICATE OF COMPLI	ANCE	OIL CONSES	RVATION-DIVISION
71. CERTIFICATE OF COMPLI	ANCE	MAV	ני זעע ו
hereby certify that the rules and regula	ations of the Oil Conservation Division have	APPROVED MAT	0 1301
	ation given is true and complete to the best of		
ny knowledge and belief.	-	BY ORIGINAL SIGN	PO BY JERRY SEXTON
		DISTRICT	I SUPERVISOR
		E TITLE MAN	

Werether Geen

Regulatory Supervisor

(Tule) 5/1/87

(Date)