

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 08-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator  
**BTA OIL PRODUCERS**

Address  
**104 South Pecos Midland, Texas 79701**

Reason(s) for filing (Check proper box)

<input checked="" type="checkbox"/> New Well	Change in Transporter of:	
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate

Other (Please explain)  
**CASINGHEAD GAS MUST NOT BE  
PLACED AFTER 4:00 PM  
UNLESS AN EXCEPTION TO R-1070  
IS OBTAINED.**

If change of ownership give name  
and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Byers, 8605 JV-P</b>	Well No. <b>1</b>	Pool/Field/Inclusion Formation <b>Osuda-Wolfcamp, West R-8450</b>	Kind of Lease State, Federal or Fee <b>Fee</b>	Lease No.
Location				
Unit Letter <b>-H-</b>	<b>1830</b>	Feet From The <b>North</b>	Line and <b>660</b>	Feet From The <b>East</b>
Line of Section <b>23</b>	Township <b>20-S</b>	Range <b>35-E</b>	NMPM, <b>Lea</b>	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

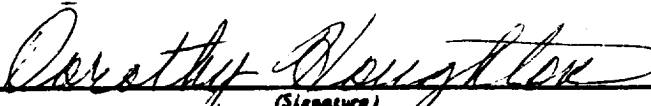
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <b>Phillips Petroleum Co. - Trucks</b>	Address (Give address to which approved copy of this form is to be sent) <b>4001 Penbrook, Odessa, TX 79762</b>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <b>Transwestern Pipeline Co.</b>	Address (Give address to which approved copy of this form is to be sent) <b>Box 1188, Houston, Texas 77001</b>
If well produces oil or liquids, give location of tanks.	Unit : Sec. : Twp. : Rge. : Is gas actually connected? : when
	<b>H : 23 : 20-S : 35-E : No : 2/6/87</b>

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

  
(Signature)  
**Regulatory Supervisor**  
(Title)  
**2/2/87**  
(Date)

OIL CONSERVATION DIVISION  
APPROVED **FEB 4 1987**, 19  
BY **ORIGINAL SIGNED BY JERRY SEXTON**  
TITLE **DISTRICT I SUPERVISOR**

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.

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.

#### IV. COMPLETION DATA

Designate Type	Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'
		X		X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth				P.B.T.D.			
11/8/86	12/29/86	11,820'				11,734'			
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay				Tubing Depth			
3677' GR 3691' RKB	Wolfcamp	11,428'				11,280'			
Perforations						Depth Casing Shoe			
11,428' - 11,440'						11,820'			
<b>TUBING, CASING, AND CEMENTING RECORD</b>									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"		13-3/8"		590'		650 sx Circ.			
11"		8-5/8"		4,394'		1600 sx Circ.			
7-7/8"		5-1/2"		11,820'		2000 sx Circ.			
		2-7/8"		11,280'					

#### 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 depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
12-24-86	12-29-86	Flow	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
6 hrs.	2370	Pkr.	Adj.
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
120 bbls.	120	-0-	824

#### GAS WELL

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

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