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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
**REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS**

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I. Operator
Operator: **BTA OIL PRODUCERS**
Address: **104 South Pecos Midland, Texas 79701**
Reason(s) for filing (Check proper box):
New Well Change in Transporter of:
Recompletion Oil Dry Gas
Change in Ownership Casinghead Gas Condensate

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE
Lease Name: **State 2, 8006 JV-P** Well No.: **1** Pool Name, including Formation: **Antelope Ridge (Atoka) R-7507** Kind of Lease: **State** Lease No.: **NMB-1040**
Location: Unit Letter **"N"**; **660** Feet From The **South** Line and **1980** Feet From The **West**
Line of Section **2** Township **23-S** Range **34-E**, NMPM, **Lea** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil or Condensate
The Permian Corporation Address (Give address to which approved copy of this form is to be sent): **Box 1183, Houston, Texas 77001**
Name of Authorized Transporter of Casinghead Gas or Dry Gas
Llano, Inc. Address (Give address to which approved copy of this form is to be sent): **P. O. Drawer 1320, Hobbs, New Mexico 88240**
If well produces oil or liquids, give location of tanks: _____ Unit **N** Sec. **2** Twp. **23-S** Rge. **34-E** Is gas actually connected? **No** When **3/1/82**

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 Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v.
Date Spudded: **8/30/81** Date Compl. Ready to Prod.: **1/30/82** Total Depth: **13,380'** P.B.T.D.: **13,360'**
Elevations (DF, RKB, RT, GR, etc.): **3376' GR** Name of Producing Formation: **Atoka** Top Oil/Gas Pay: **12,184'** Tubing Depth: **11,905'**
Perforations: **12,184' - 12867'** Depth Casing Shoe: **13,380'**

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
26"	20"	1515'	2450
17½"	13-3/8"	4851'	3000
12½"	9-5/8"	11700' DV05516'	3600
-	2-7/8"	11950'	

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 Tanks: _____ Date of Test: _____ Producing Method (Flow, pump, gas lift, etc.): _____
Length of Test: _____ Tubing Pressure: _____ Casing Pressure: _____ Choke Size: _____
Actual Prod. During Test: _____ Oil - Bbls.: _____ Water - Bbls.: _____ Gas - MCF: _____

GAS WELL
Actual Prod. Test-MCF/D: **6451** Length of Test: **24** Bbls. Condensate/MMCF: **264** Gravity of Condensate: **51.5**
Testing Method (pilot, back pr.): **Venting** Tubing Pressure (shut-in): **7230** Casing Pressure (shut-in): **Pkr.** Choke Size: **-**

VI. CERTIFICATE OF COMPLIANCE
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.
Bob K. Newland **BOB K. NEWLAND**
Regulatory Administrator
2/11/82
(Title) (Date)

OIL CONSERVATION COMMISSION
MAR 3 1982
APPROVED _____, 19____
BY **JERRY SEXTON**
TITLE **DISTRICT SUPER.**
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.