

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
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

Operator BTA OIL PRODUCERS		
Address 104 South Pecos Midland, Texas 79701		
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
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 <input type="checkbox"/>

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name <del>7608 JV P</del> Hagood	Well No. 1	Pool Name, Including Formation Wildcat	Kind of Lease State, Federal or Fee Federal	Lease No. NM-12281-A
Location Unit Letter <u>B</u> ; <u>990</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>East</u> Line of Section <u>25</u> Township <u>26-S</u> Range <u>35-E</u> , NMPM, <u>Lea</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> BASIN, INC.	Address (Give address to which approved copy of this form is to be sent) 511 W. Ohio Midland, Texas 79701	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Natural Gas Pipeline Company of America	Address (Give address to which approved copy of this form is to be sent) Box 236, Midland, Texas 79702	
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 25
	Twp. 26-S	Rge. 35-E
	Is gas actually connected? <u>Yes</u> When <u>7/11/77</u>	

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.
			X	X					
Date Spudded 8/11/76	Date Compl. Ready to Prod. 5/6/77	Total Depth 19,894'		P.B.T.D. 16,165'					
Elevations (DF, RKB, RT, GR, etc.) 2959' GL	Name of Producing Formation Pennsylvanian	Top Oil/Gas Pay 13,865'		Tubing Depth 13,600'					
Perforations 13,865' - 15,847'				Depth Casing Shoe 5,050'					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
26"	20"		900'		1150sx				
17-1/2"	13-3/8"		5050'		13700sx				
12-1/4"	9-5/8"		13200'		3125sx				
8-1/2"	7-3/4" (liner)		18070'		700sx				
6-1/2"	3-1/2" (tbg)		13600'						

V. TEST DATA AND REQUEST FOR ALLOWABLE  
OIL WELL

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 1600	Length of Test 24 hrs	Bbls. Condensate/MMCF 12	Gravity of Condensate 55
Testing Method (pilot, back pr.) orifice meter	Tubing Pressure (Shut-in) 1668	Casing Pressure (Shut-in) Pkr	Choke Size Adj.

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  
(Signature)

Regulatory Supervisor  
(Title)

7/11/77  
(Date)

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY John W. Remy  
TITLE \_\_\_\_\_

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.

RECEIVED  
JUL 13 1967  
OIL CONSERVATION COMM.  
HOBBS, N. M.