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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-105
Effective 1-1-65

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 ☐

Other (Please explain)

If change of ownership give name and address of previous owner

THIS WELL HAS BEEN PLACED IN THE POOL
DESIGNATED BELOW. IF YOU DO NOT CONCUR
NOTIFY THIS OFFICE

I. DESCRIPTION OF WELL AND LEASE

Lease Name Lea, 7406 JV-S	Well No. 6	Pool Name, including Formation Comanche Stateline, (Yates)	Kind of Lease State, Federal or Fee	Lease No. L-6315
Location Unit Letter -F- ; 2310 Feet From The North Line and 1650 Feet From The West				
Line of Section 28 Township 26-S Range 36-E, NMFM, Lea County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input 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 checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> EL PASO NATURAL GAS COMPANY	Address (Give address to which approved copy of this form is to be sent) Box 1492 El Paso, Texas 79978			
If well produces oil or liquids, give location of tanks. -N-	Unit 28	Sec. 26-S	Twp. 36-E	Is gas actually connected? When Yes May, 1978

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

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'tv. <input type="checkbox"/>	Diff. Res'tv. <input type="checkbox"/>
Date Spudded 4/22/78	Date Compl. Ready to Prod. 5/13/78		Total Depth 3250		P.B.T.D. 3245'			
Elevations (DF, RKB, RT, GR, etc., 2897' GL	Name of Producing Formation Yates		Top Oil/Gas Pay 3166'		Tubing Depth 3074'			
Perforations 3166' - 3234'					Depth Casing Shoe 1400'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		1400'		1000			
7-7/8"	5-1/2"		3250'		250			
	2-7/8"		3074'		-			

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 5/13/78	Date of Test 6/9/78	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hrs.	Tubing Pressure 300#	Casing Pressure -	Choke Size 16/64"
Actual Prod. During Test 130	Oil-Bbls. 130	Water-Bbls. 1	Gas-MCF 390

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	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
(Signature)
Regulatory Supervisor
(Title)
6/14/78
(Date)

OIL CONSERVATION COMMISSION

APPROVED JUN 20 1978

BY [Signature]
TITLE DISTRICT 2

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 conditions. This form is to be filed for each pool in multiple copies.