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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)	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 _____

DESCRIPTION OF WELL AND LEASE				
Lease Name Lea, 7406 JV-S	Well No. 9-Y	Pool Name, including Formation Comanche Stateline (Yates)	Kind of Lease State, Federal or Fee State	Lease No. L-6315
Location Unit Letter -D- ; 990 Feet From The West Line and 700 Feet From The North				
Line of Section 28 Township 26-S Range 36-E, NMEM, Lea County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)		
BASIN, INC.		511 W. Ohio Midland, Texas 79701		
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)		
EL PASO NATURAL GAS COMPANY		Box 1492 El Paso, Texas 79978		
If well produces oil or liquids, give location of tanks.	Unit -N-	Sec. 28	Twp. 26-S	Rge. 36-E
		Is gas actually connected? Yes		When September, 1978

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

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'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 8/31/78	Date Compl. Ready to Prod. 9/14/78		Total Depth 3270'		P.B.T.D. 3260'				
Elevations (DF, RAB, RT, GR, etc.), 2915' GR	Name of Producing Formation Yates		Top Oil/Gas Pay 3122'		Tubing Depth 3050'				
Perforations					Depth Casing Shoe				
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"		3270'		250				
	2-7/8"		3050'		-				

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 9/15/78	Date of Test 9/24/78	Producing Method (Flow, pump, gas lift, etc.) Pumping HF 2-1/2" x 1-1/2" x 16'	
Length of Test 24 hrs.	Tubing Pressure -	Casing Pressure -	Choke Size -
Actual Prod. During Test 101	Oil-Bbls. 101	Water-Bbls. 0	Gas-MCF 140

GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

I. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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.		APPROVED <u>1014 578</u> , 19 <u>78</u>	
BY <u>Bob K. Newland</u>		BY <u>1014 578</u>	
TITLE <u>Regulatory Supervisor</u>		TITLE <u>SUPERVISOR DISTRICT I</u>	
Bob K. Newland (Signature) Regulatory Supervisor (Title) 9/28/78		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 device 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.	