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DISTRIBUTION	NEW MEXICO OU	CONSERVATION COMMIS	SCION	_	
SANTA FE /		T FOR ALLOWABLE	2210N	Form C -104 Supersedes Old	Called and Cal
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U.S.G.S.	AUTHORIZATION TO TR		ATHDAL MAS		
LAND OFFICE		WHO ON OIL AND IN	ATORAL BAS		
TRANSPORTER +					
GAS /					
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Address				<del></del>	
	E STATE OF THE STA				
Reason(s) for filing (Check prope	er box)	Other (Please e	explain,		
New Well	Change in Transporter of:				
Recompletion	Oil Dry 0	Gas		.: .	
Change in Ownership	Casinghead Gas Cond-	ensate			
I. DESCRIPTION OF WF L.1. A	Weil No.: Fool Name, Including	Fermation :	(ind of Lease	<u> </u>	Lease No.
E. Scott Federal	3 West Kutz -	Picture Cliffs	State, Federal or Fe	e Federal	
Location	970 0. 41	* 0 = 4			
Unit Letter 0	850 Feet From The South	ine and1850	Feet From The	East	<del></del> -
Line of Section 23	Township 27-N Range	11-W , NMPM,	San Juan		County
I. DESIGNATION OF TRANSF	DODTED OF OIL AND NATURAL C	:48			
	PURIER OF OIL AND NATURAL G	IAS			
Name of Authorized Transcurer:	or Condensate	Address (Give address to	which approved cop	y of this form is to	be sent)
Name of Authorized Transcurrer :	or Condensate	Address (Give address to	which approved cop	y of this form is to	be sent)
None	of Casinghead Gas or Dry Gas	Address (Give address to			
None	of Ondensare	Address (Give address to	which approved cop	y of this form is to	be sent)
None Trame of Authorized Trans Literal Southern Union Gas (	of Odd or Condensate of Casinghead Gas or Dry Gas Co.	Address (Give address to	which approved cop	y of this form is to	be sent)
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I hereby certify that the rules and regulations of the Oil Conservation Commission have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.

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	(Signature)	
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 	(Title)	
 ·	(Date)	

APPROVED AUG 3 1966

Original Signed by Emery S. Arnold

SUPERVISOR DIST. #3

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 RLLE 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.