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NO. OF COPIES RECEIVED 2/			
DISTRIBUTION	NEW MEXICO OIL COUSERVATION COMMISSION		ON Form C-104
SANTA FE /	REQ	UEST FOR ALLOWABLE	Supersedes Old C-104 and C-1
FILE 1 V		AND	Effective 1-1-65
U.S.G.S.	AUTHORIZATION T	O TRANSPORT OIL AND NAT	URAL GAS
LAND OFFICE			
TRANSPORTER GAS			
OPERATOR /			
PRORATION OFFICE			
The British-Ameri	can Oil Producing Co	mpany	
P. O. Drawer 330,	Farmington, New Mex	ri <b>co</b>	
Reason(s) for filing (Check proper bo	x)	Other (Please exp	plain)
New Well	Change in Transporter of:	To correct	well listing
Hecomy letion	Oil	Dry Gas NMOCC Memo	
Thange in Ownership	Casinghead Gas	Condensate	
If change of ownership give name		(Formerly sho	own as Scott #6)
and address of previous owner	A I FASE		
DESCRIPTION OF WELL AND	Well No.	Pool Name, Including Formation	Kind of Lease
E. Scott Federal	6	West Kutz Compan-P.C.	State, Federal or Fee Fed.
Location			
Unit Letter <u>E</u> ; <u>1</u> 6	50 Feet From The North	1 Line and 990 F	Feet From The West
Line o: Section 36 , Ta	ownship <b>27N</b> Ra	mge <b>11W</b> , NMPM,	San Juan County
. DESIGNATION OF TRANSPOR	RTER OF OIL AND NATUR	RAL GAS Address (Give address to w	hich approved copy of this form is to be sent)
Name of Futhorized Transporter of C	None	Addiese (otto daniese to	
		·	
Name of Futhorized Transporter of C	asinghead Gas or Dry Gas		thich approved copy of this form is to be sent)
Southern Union Gas Co	asinghead Gas or Dry Gas	Union Tower Bldg	g., Dallas, Texas
_	asinghead Gas or Diy Gas		g., Dallas, Texas
Southern Union Gas Co  If well produces oil or liquids, give location of tanks.  If this production is commingled w	or Dry Gas  mpany  Unit Sec. Twp.	Rige. Is gas actually connected?  Yes  or pool, give commingling order nu	when where
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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.

Original Signed By: Rae R. Stone

Nae R. Stone	(Signature)	_
Field Superintend	ent (Title)	
August 12, 1965	(Date)	

AUG 16 1965 Original Signed Emery C. Arnow, 19. APPROVED\_ Supervisor Dist. # 3 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 Sections I, II, III, and VI only 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.  $\ \ \,$