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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

I. **The British-American Oil Producing Company**
 Address: **P. O. Drawer 330, Farmington, New Mexico**
 Reasons for Filing: New Well Change in Transporter Other (Please explain)
To correct well listing NMDCC Memo 2-65
 (Formerly shown as E. Scott No. 13)
 If change of ownership give name and address of previous owner:

II. DESCRIPTION OF WELL AND LEASE
 Well Name: **E. Scott Federal** Well No.: **13** Pool Name: **West-Kata Canyon - Dakota** Kind of Lease: **Fed.**
 Location: **Basin**
 Unit: **L** Section: **900** Feet From The: **West** Line: **1600** Feet From The: **South**
 Line of Section: **24** Township: **27N** Range: **11W** NMDCC: **San Juan** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
 Name of Authorized Transporter of Oil: **McWood Corp.** Address: **P.O. Box 1702, Farmington, New Mexico**
 Name of Authorized Transporter of Casinghead Gas: **Southern Union Gas Company** Address: **Union Tower Bldg., Dallas, Texas**
 If well produces oil or liquids, give location of tanks: Unit: **L** Sec.: **24** Twp.: **27N** Rge.: **11W** Is gas actually connected? **Yes** When: **9-18-64**

IV. COMPLETION DATA
 Designate Type of Completion - (X) Oil Well Gas Well New Well Workover Deepen Plug Back Same Rest'v. Diff. Rest'v.
 Date Spudded: **5-23-64** Date Compl. Ready to Prod.: **6-18-64** Total Depth: **6653** R.S.P.D.: **6588**
 Pool: **Basin Dakota** Name of Producing Formation: **Dakota** Top Oil/Gas Pay: **6524** Tubing Depth: **6501**
 Perforations: **6525-48 KE/ES w/ 96 holes** Depth Casing Shoe: **6650**
 TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	8-5/8"	255	200
	4-3/2"	6651	350
	2-1/16" Jnl-Con	6501	

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load on and must be equal to or exceed top allowable for this depth or be for full 24 hours)
 Date First New Test: _____ Date of Test: _____ Producing Method (Flow, pump, gas lift, etc.): _____
 Length of Test: _____ Tubing Pressure: _____ Casing Pressure: _____ Choke Size: _____
 Actual Prod. (oil, gas, water): _____ Oil-Bbls.: _____ Water-Bbls.: _____ Gas-MCF: _____
 GAS WELL
 Actual Prod. Test-MCF: **960** Length of Test: **24 hours** Bbls. Condensate/MMCF: **Not measured**
 Testing Method (meter run, back pressure): **Meter run** Tubing Pressure: **540** Casing Pressure: **700** Choke Size: **4 3/8 7/64**

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.
 Original: _____
Nae R. Stone (Signature)
Field Superintendent (Title)
August 12, 1965 (Date)

OIL CONSERVATION COMMISSION
 APPROVED **AUG 16 1965**
 BY **Original Signed Emery C. Arnold** 19
 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.