Scott #5

Scott #6

Scott Federal #10

Current records:

Change to:

Kutz	Gal	lup

Federal Fullerton #6	E-11-27N-11W	Fullerton Federal #6	
Federal Fullerton #8	G-14-27N-11W	Fullerton Federal #8	
	West Kutz Pictur	red Cliffs	•
Fullerton #1	0-15-27N-11W	Fullarton Federal #1	
Fullerton #2	G-15-27N-11W	Fullerton Federal #2	
Fullerton #3	L-14-27N-11M	Fullerton Federal #3	
Fullerton #4	D-14-27X-11W	Fullerton Federal #4	
Scott #1	P-22-27N-11W	E. Scott Federal #1	C-104 required
Scott #3	0-23-27N-11W	E. Scott Federal #3	C-104 required
Scott #4	E-23-27N-11W	E. Scott Federal #4	C-104 required

K-23-27N-11W

E-36-27N-11W

P-25-27N-11W

## Approved by

Nae R. S<sup>\*</sup>one, Field Spt.

August 13, 1965

E. Scott Federal #5 C-104 required

E. Scott Federal #6 C-104 required

E. Scott Federal #10 C-104 required

XCRO T







NO. OF COPIES RECEIVED			10	
DISTRIBUTION				
SANTA FE		1		
FILE		/	V	
u.\$.G.\$.				
LAND OFFICE				
TRANSPORTER	OIL			
TRANSPORTER	GAS	1		
OPERATOR	1			
PRORATION OFFICE		7		

	DISTRIBUTION	NEW MEXICO OIL C	CONSERVATION COMMISSION	F G 10.
	SANTA FE /		FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-11
	FILE / L	1	AND	Effective 1-1-65
	u.s.g.s.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	CAS
	LAND OFFICE	10110112711011101110	SHOT OIL AND NATURAL	GAS
	10 ANS BORT 50	7		
	TRANSPORTER GAS / .			
	OPERATOR 7			
	PROBATION OFFICE			
1.	Operator			
	Address			
	Reason(s) for filing (Check proper bo.	The later was	Other (Please explain)	
	New Well	Change in Transporter of:	Other (Please explain)	
	=			
	Recompletion	Oil Dry Go	Fig. 1 strains to the second	is y offers of his.
	Change in Ownership	Casinghead Gas Conder	nsate	
	If change of ownership give name			
	and address of previous owner	Artist Language Cont. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Section 1 to the section of the sect	4. 2/27 - 1% 4
11.	DESCRIPTION OF WELL AND			
	Lease Name	Well No. Fool Name, Including F	ormution Kind of Leas	Lease No.
	E. Scott Federal	5 West Kutz - Pi	chured Cliffs State, Feder	al or Fee Federal
	Location			7 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
	Unit Letter <b>K</b>	Post Page The	ne and Feet From	_
	Carrier 👫	teets form thebin	r eet r'ron.	rce
	Line of Sertion 23 To	wriship <b>27-N</b> Range 1	T MARIEN -	
	Effect Se t.a. 23	wsirip ::/dinge	1-W , NMPM, San Ju	an County
	DESIGNATION OF TO AMEROD	TED OF OU AND NATURAL CA	16	
111.	Name of Authorize: Transporter of Ci	TER OF OIL AND NATURAL GA	Address (Give address to which appro	and conv of this form is to be cent
	None		induces (othe dadies to leave appro-	over copy by this joint is to be setty
	Name of Authorizen Transcomer of Co	referenced Cas Total Cas Ve	Salaran (Cara aldana and Link	
			Address (Give address to which appro	oved copy of this form is to be sent)
	Southern Union Gas Co.		Fidelity Union Tower R Is gas actually connected? Wi	ldg. D.llag. Torag
	it well produces of or it inds,	Unit Sec. Twp. Rge.	Is gas actually connected? Wi	nen
	give location of tacks.	<u> </u>	Yes	Unic
	If this production is commingled w	ith that from any other lease or pool,	give commingling order number:	
	COMPLETION DATA			
	D : T (6 1	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Resty, Diff. Resty.
	Designate Type of Completi	on $-(X)$		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Elevations (DF, RKB, RT, CR, etc.,	Name of Producing Formation	Top Cil/Gas Pay	Tubing Depth
	, , , , , , , , , , , , , , , , , , , ,			
	Perforations			Depth Casing Shoe
	, choranons			Depth Cabing bloc
		TUBLIC CACING AND	D 0511511510 DE0000	
			D CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
			<u> </u>	· 
V.	TEST DATA AND REQUEST F	FOR ALLOWABLE Test must be a	ifter recovery of total volume of load oil	l and must be equal to or exceed top allow-
	OIL WELL	able for this de	epth or be for full 24 hours)	•
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	ift, etc.)
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF
	•		-11 17	
			CHILI	<del>, 0</del> – – –
	CAS WELL			
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MAGA	Condensate
	Actual Ploat 18811MOF75	Length of Teat	Bala. Condensate/ MMC	Condensate
			Casing Pressure (Sut-Si)	(CO)
	Testing Method (puot, back pr.)	Tubing Pressure (Shut-in)	Cosing Pressure (Saut-31)	Choke Size
			OIL ME	Com.
VI.	CERTIFICATE OF COMPLIAN	iCE	OIL CONSERV	ATION COMMISSION
				war.
	hereby certify that the rules and regulations of the Oil Conservation		APPROVED AUG. 3	15005 , 19
	Commission have been complied	with and that the information given	By Original Signed by	z Emery C. Arnold
	above is true and complete to the best of my knowledge and be		BY Olighidi bigned b	
			SUPERVIS	OR DIST. #3
			TITLEBUFERVISC	
				compliance with RULE 1104.
		<u> </u>	If this is a request for allo	wable for a newly drilled or deepened
	(F. g	there	well, this form must be accompated taken on the well in accompany	anied by a tabulation of the deviation
	214 C. 14822 C	of the Designation		
		function and the Recognition (Applied Text Applied Text	II All eactions of this form m	ust be filled out completely for allow-
	(7	itle)	able on new and recompleted w	vells.
	(T	The National Control of the Control	able on new and recompleted w	II III and VI for changes of owner,
		The National Control of the Control	able on new and recompleted war Fill out only Sections I, well name or number, or transpo	II, III, and VI for changes of owner, rter, or other such change of condition.
		itle)	able on new and recompleted war Fill out only Sections I, well name or number, or transpo	vells.  II. III., and VI for changes of owner, rer, or other such change of condition. st be filed for each pool in multiply