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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form 1-1-4
Supersedes Old C-104 and C-110
Effective 1-1-65

I.

Operator The British-American Oil Producing Company	
Address P. O. Drawer 330, Farmington, New Mexico	
Reason(s) for filing (if not proper box)	
New Well	Change in Transportation
Improvement	Oil
Change in ownership	Casinghead Gas
	Dry Gas
	Condensate
Other (Please explain) To correct well listing NMOCC Memo 2-65 (Formerly shown as Federal Scott #9)	
If change of ownership give name and address of previous owner	

II. DESCRIPTION OF WELL AND LEASE

Lease Name L. Scott Federal	Well No. Pool Name, including Formation 9 West Kutz Canyon - Dakota	Kind of Lease State, Federal, or other Fed.
Location Basin		
Section E	Feet From The 1850 North	Line and 790 West
Line of Range 23	Township 27N	Range 11W
County San Juan		

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil McWood Corp.	or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1702, Farmington, New Mexico
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) Union Tower Building, Dallas, Texas
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 23
	Twp. 27N	Rge. 11W
	Is gas actually connected? Yes	When 1-5-62

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input checked="" 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 7-7-61	Date Compl. Ready to Prod. 7-24-61	Total Depth 6774	P.B.T.D. 6580					
Pool Basin Dakota	Name of Producing Formation Dakota	Top Oil/Gas Pay 6573	Tubing Depth 6541					
Performances 6573-6607 per ES 2/ft.			Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 12-1/4	CASING & TUBING SIZE 8-5/8"		DEPTH SET 211		SACKS CEMENT 150			
7-3/8	4-1/2"		6761		450			
	2-3/8" EUE		6541 (Run 7-14-64)					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of fluid oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New or Re-test 7-7-61	Date of Test 7-24-61	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test 24 hours	Tubing Pressure Not measured	Casing Pressure Not measured	Choke Size Not measured
Actual Fluid Produced 2,913	Oil-Bbls. Not measured	Water-Bbls. Not measured	Gas-MMCF Not measured

GAS WELL

Actual Fluid Produced 2,913	Length of Test 24 hours	Bbls. Condensate/MMCF Not measured	Gravity of Condensate Not measured
Testing Method: (pilot, back pr.) Pilot	Tubing Pressure tubingless	Casing Pressure Not measured	Choke Size Not measured

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 Filed

Nae R. Stone

(Signature)

Field Superintendent

(Title)

August 12, 1965

(Date)

OIL CONSERVATION COMMISSION

APPROVED **AUG 16 1965**

Original Signed Emery C. A.

BY

TITLE **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 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.