

P. O. Box 4815 Midland, Texas 79704 915-682-9756

H. F. Burnett Production Superintendent West Texas District Production Division

October 23, 1984

Energy & Minerals Department Oil Conservation Division P. O. Box 1980 Hobbs, N.M. 88240

Attention: Mr. Jerry Sexton

Re: Skim Oil Scott Federal No. 2 SWD Roosevelt County, New Mexico

Dear Mr. Sexton:

Enclosed please find Form C-104 requesting authorization to transport approximately 210 STB of skim oil from the Scott Federal No. 2 SWD facility. This oil will be allocated back to individual leases according to water hauling volumes accumulated from July 17 - October 23, 1984. This allocation is presented in the attachment. In addition, by copy of this letter the transporter will be notified of this allocation.

Yours truly,

H.F. Burnett

HB/1nm

cc: Phillips C. J. Hagen

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DISTRIBUTION SANTA FE	REQUES	TFOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-11 Effective 1-1-65
U.S.G.S. LAND OFFICE IRANSPORTER OIL GAS OPERATOR I. PRORATION OFFICE Operator	AUTHORIZATION TO TI	RANSPORT OIL AND NATURA	_ GAS
Address	loration, Inc.		
Reason(s) for filing (Check proper b New Well Recompletion Change in Ownership	Change in Transporter of: Oil Dry Casinghead Gas Cond	Other (Please explain) To transport ap	oproximately 210 bbls. of GWD disposal tanks.
If change of ownership give name and address of previous owner			
II. DESCRIPTION OF WELL AND Lease Name Scott Feder.	Well No. Pool Name, Including al 2 Salt Water I	Disposal Well State, Fede	eral or Fee Federal NM-37611
		))] 	
		33E , NMPM, ROOSE	county
		Address (Give address to which app 4001 Penbrook, Odess	roved copy of this form is to be sent) a, Texas 79762 roved copy of this form is to be sent)
If well produces cil or liquids, give location of tanks.	Unit Sec. Twp. P.ge.	Is gas actually connected?	/hen
If this production is commingled v IV. COMPLETION DATA	vith that from any other lease or pool	, give commingling order number:	1
Designate Type of Complet	ion - (X)	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
HOLE SIZE	TUBING, CASING, AN CASING & TUBING SIZE	D CEMENTING RECORD	SACKS CEMENT
······			
V. TEST DATA AND REQUEST I OIL WELL Date First New Oil Run To Tanks	FOR ALLOWABLE (Test must be a able for this d	after recovery of total volume of load of epth or be for full 24 hours) Producing Method (Flow, pump, gas l	l and must be equal to or exceed top allow- ift, etc.)
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbis.	Water - Bbi <b>s.</b>	Gas-MCF
	<u> </u>	<u></u>	
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (5hut-in)	Choke Size
I. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION APPROVED OCT 2 5 1984	
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.		ByEddie W. Seay	
		TITLE OII & Gas inspector	
		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 sllow- able on new and recompleted wells. Fill out only Sections I. II. III, and VI for changes of owner,	
	ste)	well name or number, or transpor	t be filed for each pool in multiply