	NO. OF COPIES RECEIVED DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE		NSERVATION COLUSION OR ALLOWABLE AND ISPORT OIL AND NATURAL G	Form C-104 Supersedes Old C-104 and C-1 Effective 1-1-65 AS
	IRANSPORTER OIL 1 GAS 1 OPERATOR 1	· ·		RECEIVED
1.	Operator Collier Energy Inc.			JUN 24 1980
	Address P.O. Box 798 Artesia, NM 88210		······································	O. C. D.
	Reason(s) for filing (Check proper box)		Other (Please explain)	ARTESIA, OFFICE
	New Well	Change in Transporter of: Cil Dry Gas		
	Change in Ownership X	Casinghead Gas Condens		
	If change of ownership give name Collier & Collier P.O. Box 798 Artesia, NM 88210 and address of previous owner Collier & Collier			
11.	DESCRIPTION OF WELL AND L	E Empire Vet		Lease No. Nor Fee State B-2071
	Location	90 Feet From The <u>North</u> Line	and 990 Feet From 1	The West
	27	17 5		Eddy County
	Line of Section 10w	nship		
III.	Nore of Authorized Transporter of Off	ER OF OIL AND NATURAL GAS	Address (Give address to which approv N. Freeman Artesia,	ved copy of this form is to be sent) NM 88210
	Navajo Crude O	il Purchasing Co.	Address (Give address to which approx	ved copy of this form is to be sent)
		Ieum Co. 9/1/	Phillips Bldg. Bart1 Is gas actually connected?	en
	If well produces oil or liquids, give location of tanks. C 27 17S 28E Yes 1 Jan, 10, 1977			
IV	If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. R			
	Designate Type of Completio	n – (X)		P.B.T.D.
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Perforation			Depth Casing Shoe
		TUBING, CASING, AND	CEMENTING RECORD	SACKS CEMENT
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	
				and must be equal to or exceed top allo
v	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top all able for this depth or be for full 24 hours) OIL WELL Producing Method (Flow, pump, gas lift, etc.)			
	Date First New Oil Run To Tanks	Date of Test		Choke Size
	Length of Teat	Tubing Pressue	Casing Pressure	1 2 2
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas - MCF
	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 (Shut-in)	Choke Size
			OIL CONSERV	ATION COMMISSION
v	VI. CERTIFICATE OF COMPLIANCE		JUI (1 1000	
	I hereby certify that the rules and Commission have been complied above is true and complete to the	regulations of the Oil Conservation with and that the information given e best of my knowledge and belief.	BY_ Mike Williams	
	1		TITLE OIL AND GAS INSP	ECTUR
	(Signature) Agent (Title) July 1, 1980 (Date)		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviat tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allo- able on new and recompleted wells. Fill out only Sections I. II. III, and VI for changes of owr well name or number, or transporter, or other such change of conditi Separate Forms C-104 must be filled for each pool in multi-	
I I I I I I I I I I I I I I I I I I I			U The units	

-

completed wells.