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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

RECEIVED

JUN - 7 1978

Operator COLLIER & COLLIER		O.C.C. ARTESIA, OFFICE	
Address BOX 798, ARTESIA, NEW MEXICO 88210			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

If change of ownership give name
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name GILLESPIE STATE	Well No. 7	Pool Name, Including Formation E. EMPIRE YATES 7-RS,	Kind of Lease State, Federal or Fee STATE	Lease No. B 2071
Location				
Unit Letter	C	Feet From The	NORTH	Line and
Line of Section	27	Township	17	Range
			28	NMPM,
			EDDY	County

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil (X) or Condensate <input type="checkbox"/> NAVAJO CRUDE OIL PURCHASING CO.	Address (Give address to which approved copy of this form is to be sent) N FREEMAN ARTESIA, NEW MEXICO	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> PHILLIPS PET. CORP	Address (Give address to which approved copy of this form is to be sent) BARTLESVILLE OKLAHOMA	
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 27
	Twp. 17	Rge. 28
	Is gas actually connected? YES	
	When 6/2/78	

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

II. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	X		X					
Date Spudded 4/14/78	Date Compl. Ready to Prod. 4/26/78		Total Depth 775		P.B.T.D. 771			
Elevations (DF, RKB, RT, GR, etc.) GL 3617	Name of Producing Formation SEVEN RIVERS		Top Oil/Gas Pay 726		Tubing Depth 740			
Perforations 726-731					Depth Casing Shoe 773			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
10"	8 5/8"		185		pulled			
8"	7"		488		Pulled			
6 1/2"	4 1/2"		773		250 sacks			
	2 3/8"		740					

III. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

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


Date First New Oil Run To Tanks 6/2/78	Date of Test 6/5/78	Producing Method (Flow, pump, gas lift, etc.) PUMPING	
Length of Test 24 HRS	Tubing Pressure NA	Casing Pressure 25#	Choke Size NA
Actual Prod. During Test 180 brls	Oil-Bbls. 180	Water-Bbls. -0-	Gas-MCF 5

GAS WELL

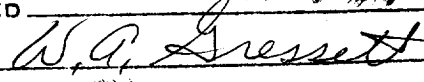
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

I. 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.


(Signature)
PARTNER
(Title)
JUNE 6, 1978
(Date)

OIL CONSERVATION COMMISSION

APPROVED
JUN - 7 1978
BY 
TITLE SUPERVISOR, DISTRICT II

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 re-completed wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter or other such change of condition.