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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-111
Effective 1-1-82

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JUN 4 1980

O. C. D.
ARTESIA, OFFICE

Operator Collier Energy, Inc.	
Address P. O. Box 798, Artesia, New Mexico 88210	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	CASINGHEAD GAS MUST NOT BE FLARED AFTER 8-1-80 UNLESS AN EXCEPTION TO Rule 306 IS OBTAINED Ex. 2-390
Recompletion <input type="checkbox"/>	
Change In Ownership <input type="checkbox"/>	
If change of ownership give name and address of previous owner	

I. DESCRIPTION OF WELL AND LEASE

Lease Name St. B-1111, Tr. 1	Well No. #9	Pool Name, Including Formation East Empire Yates 7-R	Kind of Lease State, Federal or Fee State	Lease No. B-1111
Location Unit Letter H : 1650 Feet From The North Line and 990 Feet From The East				
Line of Section 22 Township 17S Range 28E, NMPM, Eddy County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Crude Oil Purchasing Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Drawer 175, Artesia, NM 88210	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum	Address (Give address to which approved copy of this form is to be sent) Bartlesville, OK 74004	
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 22
	Twp. 17	Pge. 28
Is gas actually connected? No		
When		
If this production is commingled with that from any other lease or pool, give commingling order number: CTB 281 6-10-80		

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input 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 3/20/80	Date Compl. Ready to Prod. 5/10/80		Total Depth 800'		P.B.T.D. 783'			
Elevations (DF, RKB, RT, GR, etc.) 3592 GL	Name of Producing Formation Seven Rivers		Top Oil/Gas Pay 790'		Tubing Depth 785'			
Perforations No perfs. Open hole completion 790-800					Depth Casing Shoe 790'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
7 7/8"	4 1/2"		790'		2505XS.			
	2 3/8"		785'					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

Date First New Oil Run To Tanks 5/11/80		Date of Test 5/12/80	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs.	Tubing Pressure N/A	Casing Pressure 9 1/2#	Choke Size N/A	
Actual Prod. During Test 20	Oil-Bbls. 20	Water-Bbls. -0-	Gas-MCF TSTM	

GAS WELL

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

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.

Rhonda Parrish
(Signature)
Secretary
(Title)
6-3-80
(Date)

OIL CONSERVATION COMMISSION
JUN 5 1980

APPROVED _____, 19____
BY W.A. Gussett
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 recompleted 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.
Separate Forms C-104 must be filed for each pool in multiply completed wells.