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NEW MEXICO OIL CONSERVATION COMMISSION

MAR 18 1980

O. C. D.
ARTESIA, OFFICE

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
B-1969	

SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL, OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.

1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		7. Unit Agreement Name	
2. Name of Operator Collier Energy, Inc. ✓		8. Farm or Lease Name St. B-1969, Tr. 2	
3. Address of Operator P.O. Box 798, Artesia, New Mexico 88210		9. Well No. #14	
4. Location of Well UNIT LETTER J 1650 FEET FROM THE South LINE AND 1650 FEET FROM THE East LINE, SECTION 22 TOWNSHIP 17S RANGE 28E NMPM.		10. Field and Pool, or Wildcat East Empire Yates 7-R	
15. Elevation (Show whether DF, RT, CR, etc.) 3589.3 GL		12. County Eddy	

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

March 1, 1980: Ran 802' of 4 1/2", 9 1/2# casing. Cemented with 150 Sxs. Halliburton light weight with 6# salt, 5# gel, 1/4# flocele, followed with 100 Sxs. Class C with 2% CaCL. Circulated 20 Sxs. to surface.

18. I hereby certify that the information above is true and complete to the best of my knowledge.

SIGNED *Cheri Monk* TITLE Secretary DATE 3/17/80

APPROVED BY *W.A. Gussert* TITLE SUPERVISOR, DISTRICT II DATE MAR 26 1980

CONDITIONS OF APPROVAL, IF ANY: