

DISTRIBUTION			
SANTA FE		1	
FILE		1	✓
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL	1	
	GAS	1	
OPERATOR		1	
PRORATION OFFICE			

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and  
Effective 1-1-65

RECEIVED

JUL 28 1980

Operator Collier Energy, Inc. ✓		O. C. D. ARTESIA, OFFICE	
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"/>	Change In Transporter of:	CASINGHEAD GAS MUST NOT BE	
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>	FLARED AFTER 10-24-80	
Change In Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	UNLESS AN EXCEPTION TO Rule 306	
		IS OBTAINED	

If change of ownership give name  
and address of previous owner

Ep. # 2-426

II. DESCRIPTION OF WELL AND LEASE

Lease Name St. B-1969, Tr. 3	Well No. 19Y	Pool Name, Including Formation East Empire Yates 7-Rivers	Kind of Lease State, Federal or Fee State	Lease No. B-1969
Location Unit Letter <u>K</u> : <u>2310</u> Feet From The <u>South</u> Line and <u>2290</u> Feet From The <u>West</u> Line of Section <u>22</u> Township <u>17 South</u> Range <u>28 East</u> , NMPM, <u>Eddy</u> County				

III. 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 Company	Address (Give address to which approved copy of this form is to be sent) P. O. Drawer 175, Artesia, New Mexico 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, Oklahoma 74004	
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 22
	Twp. 17	Pgs. 28
	Is gas actually connected? <u>No</u> When	

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'
Date Spudded 6-30-80	Date Compl. Ready to Prod. 7-16-80		Total Depth 806'		P.B.T.D. 799'			
Elevations (DF, RKB, RT, CR, etc.) 3600 GL	Name of Producing Formation Seven Rivers		Top Oil/Gas Pay 766'		Tubing Depth 788'			
Perforations 766-774					Depth Casing Shoe 803'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
7 7/8"	4 1/2"		806'		250 sxs.			
	2 3/8"		788'					

V. 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 of allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 7-17-80	Date of Test 7-18-80	Producing Method (Flow, pump, gas lift, etc.) pumping	
Length of Test 24 hours	Tubing Pressure N/A	Casing Pressure 9 1/2#	Choke Size N/A
Actual Prod. During Test 25	Oil-Bbls. 25	Water-Bbls. -0-	Gas-MCF Tstm

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

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)

7-25-80  
(Date)

OIL CONSERVATION COMMISSION

APPROVED JUL 29 1980, 19

BY Mark Williams

TITLE OIL AND 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 de-well, this form must be accompanied by a tabulation of the de-tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for wells on new and recompleted wells.

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

Separate Forms C-104 must be filed for each pool in a recompleted wells.