

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

(Form C-104)
Revised 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well
Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed oil or gas well. Form C-104 is to be submitted in QUADRUPPLICATE to the same District Office to which the well was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of a new well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Artesia, New Mexico D. C. October 10, 61
(Place) (Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

R. D. Collier Western Yates State, Well No. 2, in SW 1/4 NE 1/4,
(Company or Operator) (Lease)

E. Sec. 20, T. 18S, R. 28E, NMPM, Artesia Pool
Unit Letter

Eddy County Date Spudded June 28, '61 Date Drilling Completed 9-2-61

Please indicate location:

D	C	B	A
E	F	G	H
L	K	J	I
M	N	O	P

Elevation 3600 Total Depth 2312 PBT
Top Oil/Gas Pay 1970' Name of Prod. Form Premier, Metex, Oldfield

PRODUCING INTERVAL -

Perforations 1970 2268
Open Hole Depth 2312 Depth 1970
Casing Shoe Tubing

OIL WELL TEST -

Natural Prod. Test: Trace bbls. oil, bbls water in hrs, min. Size
Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of
load oil used): 10 bbls. oil, 5 bbls water in 24 hrs, min. Size

GAS WELL TEST -

Natural Prod. Test: Trace MCF/Day; Hours flowed Choke Size
Method of Testing (pitot, back pressure, etc.):

Test After Acid or Fracture Treatment: MCF/Day; Hours flowed
Choke Size Method of Testing: Jumping 10 Bbls oil 5 water

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and
sand): 34600 gal water-300 J-99-45000 20-40 sand, 38 RCN Bal

Casing Tubing Date first new
Press. None Press. None oil run to tanks 9-2-61

Oil Transporter Continental Pipe Line Company

Gas Transporter Phillips Petroleum Co.

Remarks: No connection for gas at this time - gas being flared

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

Approved OCT 19 1961, 19.

R. D. Collier
(Company or Operator)

By: Marion L. Armstrong
(Signature)

Title Production Clerk
Send Communications regarding well to:

Name R. D. Collier

Address P. O. Box 798 Artesia, New Mexico

OIL CONSERVATION COMMISSION

By: M. L. Armstrong
Title OIL AND GAS INSPECTOR

**OIL CONSERVATION COMMISSION
ARTESIA DISTRICT OFFICE**

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NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO
CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

FORM C-110
 (Rev. 7-60)

RECEIVED
OCT 16 1961
B. E. C.
ARTESIA OFFICE

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator R. D. Collier				Lease Western Yates State	
Unit Letter E	Section 20	Township 18S	Range 28E	County Eddy	
Pool Artesia				Kind of Lease (State, Fed, Fee) State	
If well produces oil or condensate give location of tanks		Unit Letter E	Section 20	Township 18S	Range 28E
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> Continental Pipe Line Company			Address (give address to which approved copy of this form is to be sent) Artesia, New Mexico		
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>					
Authorized transporter of casing head gas <input checked="" type="checkbox"/> or dry gas <input type="checkbox"/> Phillips Petroleum Company		Date Connected ---	Address (give address to which approved copy of this form is to be sent) Bartlesville, Oklahoma		

If gas is not being sold, give reasons and also explain its present disposition:

No connections - gas being flared at present

REASON(S) FOR FILING (please check proper box)

New Well ☒ Change in Ownership ☐
 Change in Transporter (check one) Other (explain below)
 Oil ☐ Dry Gas ☐
 Casing head gas ☐ Condensate ☐

Remarks

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the **10th** day of **October**, 19**61**.

OIL CONSERVATION COMMISSION

Approved by

Title

Date

By

Title

Company

Address

Marion G. Lamm

Production Clerk

R. D. Collier

P. O. Box 798
Artesia, New Mexico

