

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Revised 10-1-78

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

CO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.U.B.	<input checked="" type="checkbox"/>
LAND OFFICE	<input checked="" type="checkbox"/>
TRANSPORTER	<input checked="" type="checkbox"/>
OIL	<input checked="" type="checkbox"/>
GAS	<input checked="" type="checkbox"/>
OPERATION	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	<input checked="" type="checkbox"/>

Operator Collier Energy, Inc. ✓		RECEIVED BY OCT 28 1983 O. C. D. ARTESIA, OFFICE
Address P.O. Drawer R, Artesia, New Mexico 88210		
Reason(s) for filing (Check proper box) New Well <input checked="" type="checkbox"/> Change in Transporter of: Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Ownership <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		

If change of ownership give name
and address of previous ownerCASINGHEAD GAS MUST NOT BE
FLARED AFTER 1-2-84
UNLESS AN EXCEPTION TO RULE 111
IS OBTAINED
BY 2-2-84 - April 20, 84

DESCRIPTION OF WELL AND LEASE

Lease Name Signal State	Well No. #4	Pool Name, including Formation Artesia Q GR SA	Kind of Lease State, Federal or Fee State	Lease E-717
Location Unit Letter E : 2310 Feet From The North Line and 330 Feet From The West Line of Section 17 Township 18S Range 28E, NMPM, Eddy Co				

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 N.M. 88210					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 17	Twp. 18	Rge. 28	Is gas actually connected? no	When

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well XX	Gas Well	New Well XX	Workover	Deepen	Plug Back	Same Res'v.	Diff.
Date Spudded 9-24-83	Date Compl. Ready to Prod. 10-7-83	Total Depth 2484'	P.B.T.D. 2460'					
Elevations (DF, RKB, RT, GR, etc.) 3608'	Name of Producing Formation San Andres	Top Oil/Gas Pay 2218' 2059'	Tubing Depth 2241'					
Perforations 2059, 60, 63, 64, 2103, -08, 2121-25, 35, 36, 39, 40, 58, 64-67, 71, 72, 2217, 2218' Total - 28 shots			Depth Casing Shoe					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4	8 5/8", 23#	378'	350 SXS
7 7/8	5 1/2", 17#	2478'	500 SXS
	2 3/8	2241'	

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 greater than
able for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 10-12-83	Date of Test 10-18-83	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure	Casing Pressure	Choke Size 11-4-83 Camp & BK
Actual Prod. During Test 100	Oil - Bbls. 30	Water - Bbls. 70	Gas - MCF n/a

GAS WELL

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

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation
Division have been complied with and that the information given
above is true and complete to the best of my knowledge and belief.Vickie J. Jue
(Signature)

Production Clerk

(Title)

Oct. 28, 1983

(Date)

OIL CONSERVATION DIVISION

OCT 31 1983

APPROVED _____, 19

Original Signed By
BY Leslie A. Clements
Supervisor District II

TITLE _____

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deep
well, this form must be accompanied by a tabulation of the day
tests taken on the well in accordance with RULE 111.All sections of this form must be filled out completely for
able 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 con-Separate Form C-104 must be filed for each pool in un-
consolidated wells.