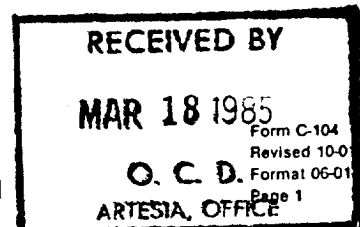


STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501



REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Collier Energy, Inc. ✓

Address
P.O. Drawer R, Artesia, New Mexico 88210

Reason(s) for filing (Check proper box)
☐ New Well
☐ Recompletion
☒ Change in Ownership
Change in Transporter of:
☐ Oil
☐ Casinghead Gas
☐ Dry Gas
☐ Condensate
Other (Please explain)

If change of ownership give name and address of previous owner Santa Rita Exploration Corp., P.O. Box 798, Artesia, New Mexico 88210

II. DESCRIPTION OF WELL AND LEASE

Lease Name Sun State	Well No. #1	Pool Name, including Formation Artesia-Q-Gb-SA	Kind of Lease State, Federal or Fee State	Lease No. OG-103
Location Unit Letter A : 990 Feet From The North Line and 430 Feet From The East Line of Section 7 Township 18S Range 28e, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> Koch Oil Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1558, Breckenridge, TX 76024
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum	Address (Give address to which approved copy of this form is to be sent) #4 Home Savings & Loan, Bartlesville, OK 74004
If well produces oil or liquids, give location of tanks. Unit A Sec. 7 Twp. 18 Rge. 28	Is gas actually connected? Yes When 12/26/84 Post ID-3 3-22-85 Chg. Op.

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Vickie Seal
(Signature)
Production Clerk
(Title)
March 6, 1985
(Date)

OIL CONSERVATION DIVISION
MAR 19 1985
APPROVED _____, 19_____
BY _____ Original Signed By
Leslie A. Clements
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.