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JAN 15 1985

O. C. D.  
ARTESIA, OFFICESTATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENTForm C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	✓
FILE	✓
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL ✓
	GAS ✓
OPERATOR	✓
PRODUCTION OFFICE	

I.

Operator Collier Energy, Inc.	
Address P.O. Drawer R, Artesia, New Mexico 88210	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input checked="" type="checkbox"/> New Well	Test Allowable for Jan 1985 for Test Tank 1 load of 185 bbls <i>Purpose 1512-1497</i>
<input type="checkbox"/> Recompletion	
<input type="checkbox"/> Change in Ownership	
Change in Transporter of:	
<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate

If change of ownership give name  
and address of previous owner \_\_\_\_\_

## II. DESCRIPTION OF WELL AND LEASE

Lease Name Comstock Fed.	Well No. #1	Pool Name, Including Formation Artesia Oil Pool	Kind of Lease State, Federal or Fee Fed.	Lease No. NM-42410
Location Unit Letter <u>N</u> ; <u>330</u> Feet From The <u>South</u> Line and <u>1650</u> Feet From The <u>West</u> Line of Section <u>12</u> Township <u>18S</u> Range <u>27E</u> , NMPM, <u>Eddy</u> County				

## III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Navajo Crude Oil Purchasing	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 Sec. Twp. Rge.
	Is gas actually connected? When

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.

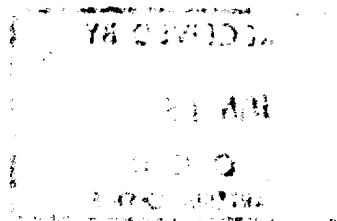
*Viewia*  
(Signature)  
\_\_\_\_\_  
Production Clerk  
(Title)  
\_\_\_\_\_  
January 15, 1985  
(Date)

## OIL CONSERVATION DIVISION

APPROVED JAN 15 1985, 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 allow-  
able 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.



#### IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 12/10/84	Date Compl. Ready to Prod. 1/9/85		Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth			
Perforations Top-1512' & Bottom 1497' Penrose						Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT			

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLA  
(Other instructions on  
reverse side)Form approved.  
Budget Bureau No. 42-R1424.

## SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back any different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM-42410	
2. NAME OF OPERATOR Collier Energy, Inc. Fred Pool Drilling, Inc. C.D.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P.O. Box 1393, Roswell, NM 88201, Artesia, Office P.O. Drawer R, Artesia, New Mexico 88210		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 330' FSL & 1650' FWL of Section		8. FARM OR LEASE NAME Comstock Federal	
14. PERMIT NO.		9. WELL NO. #1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3593'		10. FIELD AND POOL, OR WILDCAT Artesia Q-Gb-SA	
(Unit N) (SE 1/4 SW 1/4)		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 12: T-18s, R-27e	
		12. COUNTY OR PARISH Eddy	13. STATE NM

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

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON\*

REPAIR WELL

CHANGE PLANS

(Other)

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT\*

(Other)

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

1/7/85 Set cast iron bridge plug at 1970'  
Dumped 30' of Class "C" cement on top  
Plug back at 1940'  
Perforated at 1497', 1503, 04, 05, 06, 1511, 12  
2 shots per foot, total of 15 holes  
Acidized with 1500 gals 15% NEFE  
Swabbed well back

1/8/85 Fraced with 30,000 gals gelled water and  
245 sks 20/40 sand & 225 sks 12/20 sand

1/9/85 Ran 1487' of tubing  
Hung well on pump.



18. I hereby certify that the foregoing is true and correct

SIGNED Stella JueTITLE Production ClerkDATE 1/16/85

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY

JAN 19 1985

\*See Instructions on Reverse Side

CARLSBAD, NEW MEXICO