

N.M.O.G.D. COPY
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE
(Other instructions on
reverse side)Form approved.
Budget Bureau No. 42-R1424.

3. LEASE DESIGNATION AND SERIAL NO.

NM-12111

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT" for such proposals.)OIL WELL ☒ GAS WELL ☐ OTHER ☐

1. NAME OF OPERATOR

Collier Energy, Inc. ✓

2. ADDRESS OF OPERATOR

P.O. Box 798, Artesia, New Mexico 88210

3. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

1980' FSL & 990' FWL

4. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3461' GL

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Toga Federal

9. WELL NO.

#1

10. FIELD AND POOL, OR WILDCAT

Wildcat - Grayburg

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 15, T-19-S, R-27-E

12. COUNTY OR PARISH

Eddy

13. STATE

NM

6. 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) Complete in Seven Rivers zone

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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

7. 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.)*

It is our intention within the next ninety (90) days to attempt a completion of this well in the Seven Rivers zone at approximately 700'. We will set and cement 4 1/2" casing above the Seven Rivers zone at approximately 680' and complete the well open hole by fracture stimulating the Seven Rivers pay.

RECEIVED
JUL 17 1981OIL & GAS
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

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

SIGNED

Donald R. Cray

TITLE

President

DATE

7/15/81

(This space for Federal or State Office RECORD)

ROGER A. CHAPMAN

APPROVED BY
CONDITIONS OF

APPROVAL, IF ANY:

TITLE

DATE

JUL 28 1981

U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

*See Instructions on Reverse Side



LTR



Job separation sheet

N.M.O.C.D. COPY

File

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)

Form approved,
Budget Bureau No. 42 R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-12111

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

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Use "APPLICATION FOR PERMIT" for such proposals.)

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1.

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Collier Energy, Inc.

3. ADDRESS OF OPERATOR

P. O. Box 798, Artesia, New Mexico 88210

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below.)
At surface

1980' FSL & 990' FWL

SEP 23 1980

O. C. D.

ARTESIA, OFFICE

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Toga Federal

9. WELL NO.

#1

10. FIELD AND POOL, OR WILDCAT

Wildcat-Grayburg

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 15, T-19-S, R-27-E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3461 GL

12. COUNTY OR PARISH 13. STATE

Eddy

New Mexico

16.

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETION

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLAT

(Other)

(Other) suspension of operations

(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.)*

September 12, 1980: Request permission to temporarily suspend operations until a deeper rig can be acquired.

RECEIVED

SEP 15 1980

U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED

TITLE Secretary

DATE 9-12-80

(This space for Federal or State office use)

(Orig. 8-4)
APPROVED BY GEORGE H. STEWART
CONDITIONS OF APPROVAL, IF ANY

ACTING DISTRICT ENGINEER

TITLE

DATE SEP 12 1980