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O. C. D.  
ARTESIA, OFFICESTATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENTForm C-104  
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Page 1

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SANTA FE	
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U.S.O.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

## OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501REQUEST 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)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change in Transporter of: <input checked="" 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 Signal Ross	Well No. #4	Pool Name, including Formation Tonto Yates, South 7 Rivers	Kind of Lease State, Federal or Fee      Fed. NM-073240	Lease No.
Location				
Unit Letter      D      ;      330      Feet From The      North      Line and      990      Feet From The      West				
Line of Section      30      Township      19s      Range      33E      , NMPM,	Lea      County			

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

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas-New Mexico Pipe Line	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1510, Midland, Texas 79702														
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)														
<table border="1"> <tr> <th>If well produces oil or liquids, give location of tanks.</th> <th>Unit</th> <th>Sec.</th> <th>Twp.</th> <th>Rge.</th> </tr> <tr> <td></td> <td>B</td> <td>30</td> <td>19</td> <td>33</td> </tr> </table>	If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.		B	30	19	33	<table border="1"> <tr> <th>Is gas actually connected?</th> <th>When</th> </tr> <tr> <td>no</td> <td></td> </tr> </table>	Is gas actually connected?	When	no	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.											
	B	30	19	33											
Is gas actually connected?	When														
no															

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 J. [Signature]  
(Signature)  
Production Clerk  
(Title)  
June 29, 1984  
(Date)

## OIL CONSERVATION DIVISION

JUL - 9 1984

APPROVED \_\_\_\_\_, 19 \_\_\_\_\_

BY ORIGINAL SIGNED BY JERRY SEXTONTITLE DISTRICT I SUPERVISOR

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 multiple completed wells.

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