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LAND OFFICE
TRANSPORTER OIL
GAS
OPERATOR 4
PRODUCTION OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form O-104,
Supersedes OIL C-104 and C-110
Effective 1-1-65

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MAY 11 1967

Operator
Ray Smith Drilling Company
Address
3300 Republic Bank Building, Dallas, Texas
Reasons for filing (Check proper box)
New Well ☐ Change in Transporter of:
Production ☐ Oil ☐ Dry Gas ☐ Change in name of Operator only from
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐ Chemical Express, Inc., effective
May 1, 1967.
If change of ownership give name
and address of previous owner: Change in operating name only (same ownership).

II. DESIGNATION OF WELL AND LEASE

Lease Name Well No. Pool Name, Including Formation Kind of Lease Lease No.
Delhi-State 3 Vandergriff Keyes Gas State, Federal or Fee Federal B-2178-4
Location
Unit Corner H 1,980 Feet From The N Line and 660 Feet From The E
Line of Section 8 Township 17S Range 28E, NWPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Company Bartlesville, Oklahoma
If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rge. Is gas actually connected? When
H 7 17 27 Yes 11/17/63

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

IV. COMPLETION DATA

Designate Type of Completion - (X)
Date Spaced Date Compl. Ready to Prod. Total Depth P.S.T.D.
Elevations (DF, RRB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth
Perforations Depth Casing Shoe
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)
Length of Test Tubing Pressure Casing Pressure Choke Size
Actual Prod. During Test Oil-Bbls. Water-Bbls. Gas-MCF
Grav. of Oil Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate
Flowing Method (Flow, gas lift) Tubing Pressure (Chart-in) Casing Pressure (Chart-in) Choke Size

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

OIL CONSERVATION COMMISSION

APPROVED

BY

TITLE

This form is to be filed in compliance with Rule 2 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 2 111.

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.

One form (Form O-104) must be filed for each pool in multiple

Neil M. Hoffman
Neil M. Hoffman, Agent
May 12, 1967