

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

Form C-104
Revised 10-01-78
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FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRODUCTION OFFICE			

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 Smith & Marrs, Inc.
Address P.O. Box 863, Kermit, TX 79745
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)
Ownership Change effective 8/1/88

If change of ownership give name and address of previous owner J. R. Cone, P.O. Box 10217, Lubbock, TX 79408

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Cone Jalmat</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Jalmat Tansil Yates SR</u>	Kind of Lease <u>State, Federal or Fee State</u>	Lease No. <u>E-396-8</u>
Location Unit Letter <u>I</u> ; <u>2310</u> Feet From The <u>South</u> Line and <u>330</u> Feet From The <u>East</u> Line of Section <u>25</u> Township <u>22S</u> Range <u>35E</u> , NMPM, <u>Lea</u> 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"/> <u>Texas New Mexico Pipe Line Co.</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 2528, Hobbs, NM 88241</u>			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>Phillips Petroleum Co. 66 Natl Gas</u>	Address (Give address to which approved copy of this form is to be sent) <u>4001 Penbrook, Odessa, TX 79762</u>			
If well produces oil or liquids, give location of tanks.	Unit <u>I</u>	Sec. <u>25</u>	Twp. <u>22S</u>	Rge. <u>35E</u>
	Is gas actually connected? <u>Yes</u>		When <u>April 1956</u>	

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.

[Signature]
(Signature)
Agent
(Title)
11/4/88
(Date)

OIL CONSERVATION DIVISION

APPROVED NOV 27 1988, 19_____
BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR
TITLE _____

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.

RECEIVED

NOV 4 1988

DCI
HOUSING OFFICE