

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

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)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate 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 Cone Jalmat Yates Pool Unit Tr. 5	Well No. 2	Pool Name, Including Formation Jalmat Tansil Yates SR	Kind of Lease State, Federal or Fee State	Lease No. E-1625-E
Location Unit Letter <u>L</u> ; <u>2310</u> Feet From The <u>South</u> Line and <u>990</u> Feet From The <u>West</u> Line of Section <u>24</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 type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Water Injection Well	
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.

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

OIL CONSERVATION DIVISION
APPROVED NOV 2 1988, 19
BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 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.

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
PILZ	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-79

5a. Indicate Type of Lease
State ☒ Fee ☐

5. State Oil & Gas Lease No.

E-1625-E

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO OPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <u>Water Flood Injection Well</u>	7. Unit Agreement Name <u>Cone</u>
2. Name of Operator <u>J.R. CONE</u>	8. Farm or Lease Name <u>Jalant Yates Pool Unit</u>
3. Address of Operator <u>P.O. BOX 10271, LUBBOCK, TX 79408</u>	9. Well No. <u>2</u>
4. Location of Well UNIT LETTER <u>L</u> <u>2310</u> FEET FROM THE <u>South</u> LINE AND <u>990</u> FEET FROM THE <u>West</u> LINE, SECTION <u>24</u> TOWNSHIP <u>22-S</u> RANGE <u>35-E</u> N.M.P.M.	10. Field and Pool, or Wildcat <u>Jalant</u>
15. Elevation (Show whether DF, RT, GR, etc.) <u>3602 DF</u>	12. County <u>Lea</u>

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL GA ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER Conversion to water flood injection ☒
under Administrative Order WFX No. 206

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Original completion data: Formerly Antweil State "A" Well No. 2; TD 3950; 6" 16 & 181b casing cemented at 3950' with 250 sacks; Top Yates 3753; casing perforated 3854-3878' and 3896-3914'; frac'd perforated 3802-3827'; frac'd squeezed all casing perforations with 2000 sacks cement; re-perforated 3802-3827' and 3896-3914'; completed October 1957.

Converted to water flood injection: May 12, 1965.

February 12, 1987, pulled tubing and packer, found holes in bottom two joints of tubing. Ran recondition Baker AD-1 and tested tubing in hole. Set packer @3689. Circulated packer fluid and tested casing with no pressure loss.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Jerry Sexton TITLE Agent DATE 10-9-87

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE 10-15-1987

CONDITIONS OF APPROVAL, IF ANY: