

| | |
|------------------|----------------|
| DISTRIBUTION | 5 |
| ALBUQUERQUE | 1 |
| LE | 1 |
| S.G.S. | |
| AND OFFICE | |
| TRANSPORTER | OIL / GAS / |
| OPERATOR | / |
| PRORATION OFFICE | |

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

Form C-104
Supersedes Old C-104 and C-1
Effective 1-1-65

DEC 20 1973

I. Operator **JEM. Resources, Inc.** **O. C. C.**
ARTESIA OFFICE
Address **505 Marquette, N. W. Suite 1420, Albuquerque, New Mexico 87102**
Reason(s) for filing (Check proper box, Other (Please explain))
New Well ☐ Change in Transporter of ☐
Incompletion ☐ ☒ ☐
Change in Ownership ☒ ☐ ☐
If change of ownership give name and address of previous owner **Robert H. Birdwell, Drawer 40, Artesia, New Mexico**

II. DESCRIPTION OF WELL AND LEASE

| | | | |
|-----------------------|---|--|------------------|
| Lease Name | Well No. or Name, Location, etc. | Kind of Lease | Lease No. |
| Cave Pool Unit | 39 Cave Grayberg | State, Federal or Fee | State 741 |
| Location | Unit Letter A 660 Feet From The North 660 Feet From The East | Line of Section 7 Township 17S Range 29E NMNM Eddy 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"/> | Address (Give address to which approved copy of this form is to be sent) |
| Navajo Crude Oil Purchasing Co. | N. Freeman Avenue, Artesia, New Mexico |
| Name of Authorized Transporter of Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |
| Phillips Petroleum Co. | Phillips Bldg., Odessa, Texas |
| If well produces oil or liquids, give location of tanks. | When |
| J 5 17S 29E | 3-1-62 |

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

IV. COMPLETION DATA

| | | | | | | |
|--------------------------------------|----------------------------|-----------|-------------------|-----------|-------------|--------------|
| Designate Type of Completion - (A) | Gas Well | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
| Date Spudded | Date Casing Set | Depth | P.B.T.D. | | | |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producer Formation | Gas Pay | Testing 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 OIL WELL

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

| | | |
|---------------------------------|------------------|---|
| Date First New Oil Run To Tanks | Date of Test | Producing Method (Flow, pump, gas lift, etc.) |
| Length of Test | Testing Pressure | Choke Size |
| Actual Prod. During Test | Oil - Bbls. | Gas - MCF |

GAS WELL

| | | | |
|----------------------------------|----------------------------|---------------------------|-----------------------|
| Actual Prod. Test - MCF/D | Length of Test | Condensate/MMCF | Gravity of Condensate |
| Testing Method (pilot, back pr.) | Testing Pressure (shut-in) | Casing Pressure (Shut-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.

Lewis C. Jameson (Signature)

President

December 11, 1973

(Date)

OIL CONSERVATION COMMISSION

APPROVED **DEC 21 1973**, 19
BY **W. A. Gracett**
TITLE **OIL AND GAS INSPECTION**

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.