

DISTRIBUTION	5	
SALE	1	
FILE	1	
G.S.		
FIELD OFFICE		
TRANSPORTER	OIL	
	GAS	1
OPERATOR		1
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
 REQUEST FOR ALLOWABLE

Form C-104
 Supersedes Old C-104 and C-110
 Effective 1-1-65

AUTHORIZATION TO PRODUCE OIL AND NATURAL GAS

RECEIVED

DEC 17 1973

I. OPERATOR
 Operator: JMI Resources, Inc.
 Address: 505 Marquette, N. W. Suite 1620, Albuquerque, New Mexico 87102
 Reason(s) for filing (Check proper box):
 New Well Change in Transporter
 Recompletion Oil
 Change in Ownership Casinghead Gas

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: Cave Pool Unit Well No.: 16 Pool Name: Cave Grayberg
 Location: Unit Letter 6 : 660 Feet From The South 1.80 Feet From The East
 Line of Section 5 Township 17S Range 29E Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
 Name of Authorized Transporter of Oil or Condensate: Navajo Refining Co., Pipeline Division
 Name of Authorized Transporter of Casinghead Gas: Phillips Petroleum Co.
 If well produces oil or liquids, give location of tanks: Unit J Sec. 5 Twp. 17S Range 29E

IV. COMPLETION DATA
 Designate Type of Completion - (X) Oil Well Gas Well
 Date Spudded: _____ Date Compl. Ready to Prod.: _____
 Elevations (DF, RKB, RT, GR, etc.): _____ Name of Producing Formation: _____
 Perforations: _____
 TUBING, CASING, AND CEMENTING RECORD
 HOLE SIZE: _____ CASING & TUBING SIZE: _____
 DEPTH SET: _____ SACKS CEMENT: _____

V. TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL
 Date First New Oil Run To Tanks: _____ Date of Test: _____
 Length of Test: _____ Tubing Pressure: _____
 Actual Prod. During Test: _____ Oil - Bbls.: _____
GAS WELL
 Actual Prod. Test - MCF/D: _____ Length of Test: _____
 Testing Method (pitot, back pr.): _____ Tubing Pressure (shut-in): _____

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 (Title)
 December 11, 1973 (Date)

Name and address to which approved copy of this form is to be sent:
N. Freeman Avenue, Artesia, New Mexico
 Name and address to which approved copy of this form is to be sent:
Phillips Bldg., Odessa, Texas
 Fully connected? When: 3/2/62

Logging order number: _____
 Workover Deepen Full Stack Same Restv. Diff. Restv.
 Gas Pay _____ Turbine Depth _____
 Depth Casing Shoe _____

Volume of total volume of load oil and must be equal to or exceed top allowable for full 24 hours
 Method (Flow, pump, gas lift, etc.): _____
 Pressure _____ Choke Size _____
 Rate _____ Gas-LIFT _____
 Rate/MMCF _____ Gravity of Condensate _____
 Pressure (shut-in) _____ Choke Size _____

OIL CONSERVATION COMMISSION
 RECEIVED DEC 18 1973
W. A. Grassitt
 OIL AND GAS INSPECTOR
 This form is to be filed in compliance with RULE 1104.
 This is a request for allowable for a newly drilled or deepened well. This form must be accompanied by a tabulation of the deviation taken on the well in accordance with RULE 111.
 All sections of this form must be filled out completely for allowable for new and recompleted wells.
 Fill out only Sections I, II, III, and VI for changes of owner, name or number, or transporter, or other such change of condition.