REQUEST FOR (OIL) - (GAS) ALLOWABLE 1 6 195 New Well

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Other Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

				Breckenridge, T (Place)		Sept.	(Date)
			ING AN ALLOWABLE FOR				
The Ibex Company (Company or Operator)			Paton=Federal (Lease)	, Well No2	, in	S.E	4S.W1/4,
Unit Lot	Sec	6 <u>.</u>	, T18. S, R27. E	, NMPM.,Re	d.Lake	*****************	Pool
Eddy		· · · · · · · · · · · · · · · · · · ·	County. Date Spudded	8/10/57 Date	Drilling (Completed	9/1/57
Please indicate location:			Elevation 3356				
D	C B	A	Top 011/Gas Pay 1690 PRODUCING INTERVAL -	Name of Prod.	Form.	San Andr	25
E	F G	H	Perforations 1690 to	1700 and 1712	to 1726	Depth	1600
L	K J	Ī	OIL WELL TEST -				
			Natural Prod. Test: Test After Acid or Fracture				
M :	. 0	P	load oil used): 55 bb				 .
Sire 8 5/8	917	300	Method of Testing (pitot, b Test After Acid or Fracture Choke Size Method Acid or Fracture Treatment (Treatment:of Testing:	MCF	/Day; Hours	flowed
5 1/2	1765	125	sand): Frac 250 acid Casing Press. 2200 Tubing No.	i. 12000 gal. oil	18,000	# sd. 80	balls down c
			Oil Transporter Male	O Pipe Line Divis	9/1/ ion	1771	
emarke:			Gas Transporter				
venni ki		••••••••••••••••••••••••					
	•		rmation given above is true a	•	•	wledge.	
			5.7 19	By: JA	ompany or C	1 1	A. Ford
	L An	A		(Signature) Title Ass't Prod. Supt.			
y: <i>l.d.l.</i>		MANZ		Send Commu			ll to:
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			,	AddressBrecken	ridge7	Cexas	

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