## NEW M TICO OIL CONSERVATION COMMITY Santa Fe, New Mexico

(Form C-104) Revised 7/1/57

## REQUEST FOR (OIL) - (CEASE) ALLOWABLE

New Well

This form	n shall be su	bmitted by	the operator before an initial allowable will be assigned to any completed Oil or Gas well.
Form C-104 i able will be a	s to be subm assigned effect	itted in Q tive 7:00	A.M. on date of completion or recompletion, provided this form is filed during calendar ion. The completion date shall be that date in the case of an oil well when new oil is deliv-
			(Place) (Date)
WE ARE H	EREBY RE	QUESTIN	NG AN ALLOWABLE FOR A WELL KNOWN AS:
Secony M	obil Oil	Company	, Inc. William R. Hibrey Well No.
(Con	npany or Open	6	, T9S, R
Unit Lot	her		Date Drilling Completed
Please	e indicate lo		Top Oil/Gas Pay959bName of Prod. FormBonch MCM
D 3	C B	A	PRODUCING INTERVAL -
660	F G	H	Perforations 9598-9609 & 961)1-96211 Depth Depth Depth 25511
E			Open Hole
	K J		OIL WELL TEST - Choke Natural Prod. Test:bbls.oil,bbls water inhrs,min. Size
L			Natural Prod. Test:bbls.oll,bbrs.water Inbors water Inbors
	N O	P	Test After Acid or Fracture Ireatment (after Iccourt, or the Choke load oil used): <u>205</u> bbls.oil, <u>0</u> bbls water in <u>21</u> hrs, <u>men</u> min. Size <u>11</u> (6)
M		-	
			GAS WELL TEST - 
		Bean	
Tubing ,Car Sure	sing and Geme Feet	SAX	Test After Acid or Fracture Treatment:MCF/Day; Hours flowed
	11		Choke SizeMethod of Testing:
10 3/4	<u>= 1071</u>	375	Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and
7 5/8	" 1.16C"	1200	Too cole 154 N. E. Acid & 6000 gels 154 Hetarteo Acid
5 1/2		6 m.s.	Casing lubing id (i) cil run to tanks h-lb-bu
Liner	5713'	870	Oil Transporter Magnolia Pipe Line Company
2" th	B 9554		
Remarks.	607.15	30/1. Gr	Gas Transporter avity 49.5° @ 60°, TP 500-540#, CP Pkr.
			11111 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
			// C .
I her	eby certify t	hat the in	formation given above is true and complete to the best of my knowledge.
Approved	•••••••••••••••••••••••••••••••••••••••	,	, 19
C		ervatiø	N COMMISSION By: (Signature)
1	1/1 1	¥/	Title District Superintendent Send Communications regarding well to:
By:f.f.	f the second		Send Communications regulary, Inc. Name
Title			Address. 502. 2406. Hobbs, New Mexico
		V	Address. 502. 2406