

**NEW MEXICO OIL CONSERVATION COMMISSION**  
Santa Fe, New Mexico

Form O-104  
Revised 11-1-57

**REQUEST FOR (OIL) - (GAS) WELL TEST**

This form shall be submitted by the operator before an initial test. Form O-104 is to be submitted in duplicate to the same District Office where Form O-101 was sent. The allowable time will be assigned effective 7:00 a.m. on date of completion or receipt of this form is filed during calendar month of completion or receipt. The completion date shall be the date when new oil is delivered into the tank tanks. (Note: 1.25 psi at 60° Fahrenheit.)

New Mexico  
Receipts  
(Date) (Date)

WE ARE REQUESTING A WELL TEST FOR A WELL KNOWN AS:

Well No. 37-2, Section 2, T1N, R1E, S10E, County San Juan, State N.M.

County San Juan Date 5/1/58 Operator Skelly Oil Company Well No. 37-2 Section 2 Township T1N Range R1E Survey S10E  
Elevation 3,000 Feet 351 Feet 351 Feet  
Top Oil/Gas Pay 3672 Feet

**PRODUCING INTERVAL -**

Performance 3672 to 3700 feet  
Open Hole 3672 Casing Shoe 3700 Depth 3700 Feet  
Tubing 3700 Feet

**OIL WELL TEST -**

Natural Prod. Test: 0 bbls. oil, 0 bbls. water in 0 hrs, 0 min. Size 0  
Test After Acid or Fracture Treatment (after 0 bbls. of oil equal to volume of acid used): 0 bbls. oil, 0 bbls. water in 0 hrs, 0 min. Size 0

**GAS WELL TEST -**

Natural Prod. Test: 0 MCF/Day; hours flowed 0 Choke Size 0  
Method of Testing (pitot, back pressure, etc.): 0  
Test After Acid or Fracture Treatment: 0 MCF/Day; hours flowed 0  
Choke Size 0 Method of Testing: 0

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): See Remarks  
Casing 0 Tubing 0 Date first new 0  
Press. 0 Press. 0 oil run to tanks 0

Oil Transporter Skelly Pipe Line Company  
Gas Transporter Skelly Oil Company

Remarks: Run casing 5/1/58 casing with 2 gal. cementum at 3672 ft. and 3700 ft. 3700 ft. size was 1000 gals. IST. N.P. Test with 60,000 gals. water and 30,000 lbs. sand and 250 lbs. crushed rapeseeds.

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

Approved: 0 (Signature)  
Oil Conservation Commission  
By: 0 (Signature)

Title: Assistant District Supervisor  
Send Communications regarding well to:  
Name: H. H. 200

Address: P.O. Box 100, Hobbs, New Mexico