Form 3160-5 (November 1983) (Formerly 9-331)

STATES

DEPARTMENT OF THE INTERIORM. Of Control Instructions on Sudget Bureau No. 1004-0135

Expires August 31, 1985

BUREAU OF LAND MANAGEMENT 811 S. 1st Street Co.

	A	urtesia, NM 88210-283	LC-029418-B	ERIAL NO.
SUNDRY NOTICES AND REPORTS ON WELLS			6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT - " for such proposals)				
I.			7. UNIT AGREEMENT NAME	
WELL WELL	OTHER		Skelly Unit	
2. NAME OF OPERATOR			8. WELL NAME AND NO.	
The Wiser Oil Company			78	
3. ADDRESS OF OPERATOR P.O. Pour 2569, IV 11			9. API WELL NO.	
P.O. Box 2568 Hobbs, New Mexico 88241 S			30-015-05366	
4. LOCATION OF WELL (Report location clearly and in accordance with any State respired tests. See also space 17 below.)			10. FIELD AND POOL, OR WILDCAT	
At must 1.1 at 2			Grayburg Jackson 7-Rivers-QN-GB-SA	
1278' FSL & 600 ' FWL Unit M			11. SEC., T., R., M., OR BLK. AND	
Slty Slty			SURVEY OR AREA	
14. PERMIT NO 15 FLEVATIONS (Show that DE DE DE			Sec. 23-T17S-R31E	
	15. ELEVATIONS (Show whether DF, 3859' DF	RT, GR, etc.)	12. COUNTY OR PARISH	13. STATE
16. Check A			Eddy County	NM
16. Check Appropriate Box to indicate Nature of Notice, Report, or Other Data				
NOTICE OF INTENTION TO:			SEQUENT REPORT OF:	
TEST WATER SHUT OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL	
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING	
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING		
DEDAM WEY		SHOOTING OK ACIDIZING	ABANDONMENT *	
REPAIR WELL	CHANGE PLANS	(Other) TA		
			of multiple completion on Well	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS: (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any				
proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)				
02/12/99 MIRU Pool Well Service. ND WH. NU BOP's. Ran sand line survey to 3380'. RU Computalog. RIH to 190' and hit				
parrafin. POH. RIH w/parrafin knife and cut parrafin. LD knife. Picked up cutter and RIH. Cut tbg. @ 3130'. Circulated pkr. fluid. LD 2-3/8" tbg. RIH w/gauge ring and junk basket to 3130'. Dumped 2 sks. cmt on CIBP @ 3130'. RDMO.				
02/18/99 Ran casing integrity test. 360# for 15 minutes. Test witnessed by OCD. Well is TA. Final Report.				
The state of the				
		- 17 anasma	050-0¢:	
		DORZ MONTH	PERIUM	
	## 5.2 Mb 2 M 5.4M	8-24-00		
	ending			
18. I hereby certify that the foregoing is true and	соггест.			
SIGNED May On June	TTT D. Commission	D	.~	
- repart to rankey	TTTLE Completion	Department	DATE <u>July 21, 1999</u>	
(This space for Federal or State office use)				·
APPROVERENT LCARV COLIDER	TITLE			
APPROVED LIGHT APPROVAL, IF ANY	E.I		DATE	<u> </u>
File				

