

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE \*  
(Other Instructions on  
reverse side)

Oil Cons. N.M. Div. Dist. 2  
1301 W. Grand Avenue  
Alamogordo, NM 88210  
Expires August 31, 1985

PERMIT NO. LC-029419-A

SUNDRY NOTICES AND REPORTS ON WELLS

(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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> P & A		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR The Wiser Oil Company		7. UNIT AGREEMENT NAME Skelly Unit	
3. ADDRESS OF OPERATOR P.O. Box 2568 Hobbs, New Mexico 88240		9. API NO. 30-015-05347	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface  660' FNL & 660' FWL Unit D		10. FIELD AND POOL, OR WILDCAT Grayburg Jackson Fren 7-Rivers	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 22-T17S-R31E	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3852' DF	12. COUNTY OR PARISH Eddy County	13. STATE NM

16. Check Appropriate Box to indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) _____	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <u>P &amp; A</u>	
(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

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.)

12/26/01 MIRU Mayo Marrs Casing Pulling Inc. Install WH. Elected down 15 gallons oil from well. Well dead. RIH w/WL & tag CIBP @ 2150'. RIH w/2-3/8" tbg. Circulate until well cleans up to KCL water per Jim Amos. Spot 40 sks. cmt. @ 1612'-1492'. POH & spot 40 sks. @ 930'-810'. POH & spot 40 sks. @ 620'-510'. POH & closed well in. All plugs & tags witnessed by BLM Homer Saenz.

12/27/01 Spot 40 sks @ 250'-130'. POH & WOC. Homer Saenz w/BLM asked to tag in 4 hrs. Call BLM @ 5 hrs. said to tag & go forward, BLM not able to witness. RIH & tag @ 130'. Call Jim Amos w/BLM. He ok'd to proceed. Kathy w/BLM showed up. Retag plug @ 130'. Kathy said not to wait on her again if she did not show up to go ahead. Spot 20 sks. @ 50' to surface. Cut off WH. RD. Install dry hole marker. Well is P & A.

18. I hereby certify that the foregoing is true and correct.

SIGNED Mary Jo Turner TITLE Production Tech II DATE January 12, 2002

(This space for Federal or State office use)

APPROVED BY (ORIG. SGD.) ALEXIS C. SWC DATE JAN 23 2002

CONDITIONS OF APPROVAL, IF ANY:

PETROLEUM ENGINEER

Accepted for record  
Title  
stater only  
JAN 29 2002

\*See Instruction On Reverse Side

ly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent