



SKU G# 81  
GRAPHIC CONTROLS CORPORATION  
BUFFALO, NEW YORK  
NICK J. 3-05-02

Newark W. 500  
called for by ok  
BR 2221

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPlicate  
(Other Instructions on  
reverse side)

Oil Cons. Budget Bureau No. 1004-0135  
N.M. Div. Dist. 2 Expires August 31, 1985  
1301 W. Grand Avenue  
Artesia, NM 88210

c191

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"/> Injection		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 (505) 392-9797		8. WELL NO. 81	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface  810' FSL & 660' FEL Unit P		9. API WELL NO. 30-015-05371	
10. FIELD AND POOL, OR WILDCAT Grayburg Jackson 7-Rivers-QN-GB-SA		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 23-T17S-R31E	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3875' 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) <input type="checkbox"/>	

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) Remedial <input type="checkbox"/>	
(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.)

3/04/02 MIRU Eunice Well Service. ND WH. RU BOP. Unset pkr. Moved to 3220'. POH w/2-3/8" tbg. RIH w/2-3/8" tbg. Screwed back onto pkr. @ 3220'. POH w/2-3/8" tbg. LD pkr. RIH w/redressed 2-3/8" x 5-1/2" AD-1 pkr. & 104 jts. 2-3/8" IPC tbg. Circulate 75 bbls. pkr. fluid. Set pkr. @ 3190'. RD BOP. NU WH. Notified Jerry Guy w/NMOCD. He gave ok. Test performed by Nick Jimenez w/Gandy Corporation (Original chart to NMOCD). Ran casing integrity test to 500# for 30 minutes. Held. Placed well back to injection on 50 BWPD @ 1400#. RDMO.

ACCEPTED FOR RECORD

MAY 29 2002

ALEXIS C. SWOBODA  
PETROLEUM ENGINEER

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

SIGNED Mary Jo Turner TITLE Production Tech II DATE May 15, 2002  
Mary Jo Turner

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

\*See Instruction On Reverse Side

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.