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

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE *
(Other Instructions on reverse side)

OPERATOR'S COPY

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL 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.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1. OIL WELL [ ] GAS WELL [ ] OTHER TA

7. UNIT AGREEMENT NAME
Skelly Unit

2. NAME OF OPERATOR
The Wiser Oil Company

8. WELL NO.
3

3. ADDRESS OF OPERATOR
P.O. Box 2568 Hobbs, New Mexico 88240 (505) 392-9797

9. API WELL 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 7-Rivers-QN-GB-SA???

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:				SUBSEQUENT 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	[ ]	ABANDONMENT *	[ ]
REPAIR WELL	[ ]	CHANGE PLANS	[ ]	(Other)_____			[ ]
(Other) Plug & Abandon				(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.)*

Wiser request approval to plug and abandon the well by the procedure listed below.

SURFACE CASING: 13-3/8" SET @ 1[illegible] W/Cement Circulated PRODUCTION CASING: 9-5/8" @ 3784' W/Cement Circulated PERFS: 2224'-3746'

1. TIH w/tbg. & tag cmt. @ CIBP 2150' W/35' Cement On Top
2. Circulate abandonment mud to surface.
3. POH to 1600' & set 100' plug. F/1500-1600'
4. Tag cmt. Plug.
5. POH to 600' & set 100' plug. F/500-600'
6. Tag cmt plug.
7. Set 50' cmt. plug @ surface F/0-50'
8. Install dry hole marker.
9. Clean location. RDMO.

Top Salt 568'
Base Salt 1560'

Set 100' Plug F/150-250'

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

SIGNED J M Jones TITLE Production Tech II DATE September 28, 2001
Mike Jones

(This space for Federal or State office use)

APPROVED BY David R. Glass TITLE DATE
CONDITIONS OF APPROVAL, IF ANY:

APPROVED
OCT 5 2001
DAVID R. GLASS
PETROLEUM ENGINEER

OIL CONSERVATION DIVISION
CASE NUMBER
Wiser
EXHIBIT

*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.

SEE ATTACHED FOR CONDITIONS OF APPROVAL

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

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other Instructions on reverse side)

OPERATOR'S COPY

Budget Bureau No. 1004-0135
Expires August 31, 1985

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.)

5. LEASE DESIGNATION AND SERIAL NO.: LC-029419-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

7. UNIT AGREEMENT NAME: Skelly Unit

1. OIL WELL [ ] GAS WELL [ ] OTHER TA

2. NAME OF OPERATOR: The Wiser Oil Company

8. WELL NO.: 3

3. ADDRESS OF OPERATOR: P.O. Box 2568 Hobbs, New Mexico 88240 (505) 392-9797

9. API WELL 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:				SUBSEQUENT 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	[ ]	ABANDONMENT *	[ ]
REPAIR WELL	[ ]	CHANGE PLANS	[ ]	(Other) Temporary Abandon			[■]
(Other)				(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.)*

9/10/01 MIRU Key Well Service. ND WH. RU BOP. Stung out of 9-5/8" Otis dual pkr. POH w/2-3/8" x 6' sub & 67 jts. 2-3/8" IPC tbg. LD setting tool.

9/11/01 Stung out of Baker "D" pkr. POH w/2 jts. 2-3/8" IPC tbg., Otis dual pkr., 2-3/8" subs & 5 jts. 2-3/8" IPC tbg.

9/12/01 LD subs & 68 ½ jts. 2-3/8" tbg. Tbg. parted – Body break jt. above 9-5/8" Otis dual pkr.

9/13/01 TIH w/2-3/8" overshot, 3-3/4" bumper sub, 3-3/4" Bowen jars, DC's & 62 jts. 2-3/8" work string. Could not catch fish. POH w/2-3/8" work string, DC's & tools. TIH w/spear, bumper sub, jars, DC's & 63 jts. 2-3/8" work string. POH & lost fish to bottom. Could not spear fish. POH w/2-3/8" work string & tools.

9/14/01 TIH w/spear, bumper sub, jars, DC's & 65 jts. 2-3/8" work string. Top of pkr. @ 2225'. Top of tbg. @ 2180'. Could not spear pkr. POH w/2-3/8" work string. LD DC's & tools.

9/17/01 Started in hole w/2-3/8" work string. Could not overcome water flow. Stood tbg. back. Connected well to flow directly to Battery "A".

9/18/01 RIH w/2-3/8" work string. Tagged Otis 9-5/8" pkr. @ 2225'. LD 71 jts. 2-3/8" work string. RIH w/72 jts. 2-3/8" IPC tbg. POH. LD 72 jts. 2-3/8" tbg. RD BOP. Could not nipple up WH. RU BOP. Left flowing to Battery "A". RDMO.

9/25/01 MIRU Key Well Service. RU Computalog WL & RIH w/9-5/8" CIBP. Set plug @ 2150'. RD WL. RD BOP. NU WH. RDMO. Well is TA. Will circulate pkr. fluid & pressure test at a later date. Contacted Jerry Guy w/NMOCD & Gene Hunt w/BLM. Both gave ok's.

9/28/01 MIRU Key Well Service. NU 5-1/2" Larkin head. RU BOP. RIH w/2-3/8" tbg. Tagged CIBP @ 2150'. Circulated 180 bbls. pkr. fluid. Ran casing test to 500#. Blew collar off WH. POH w/2-3/8" tbg. LD collar. RDMO.

10/01/01 Test casing to 500 PSI for 30 minutes. (Copy of pressure chart attached, original to NMOCD). Performed/witnessed by Nick Jimenez w/Gandy Corporation.

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

SIGNED Mary Jo Turner TITLE Production Tech II DATE September 29, 2001
Mary Jo Turner

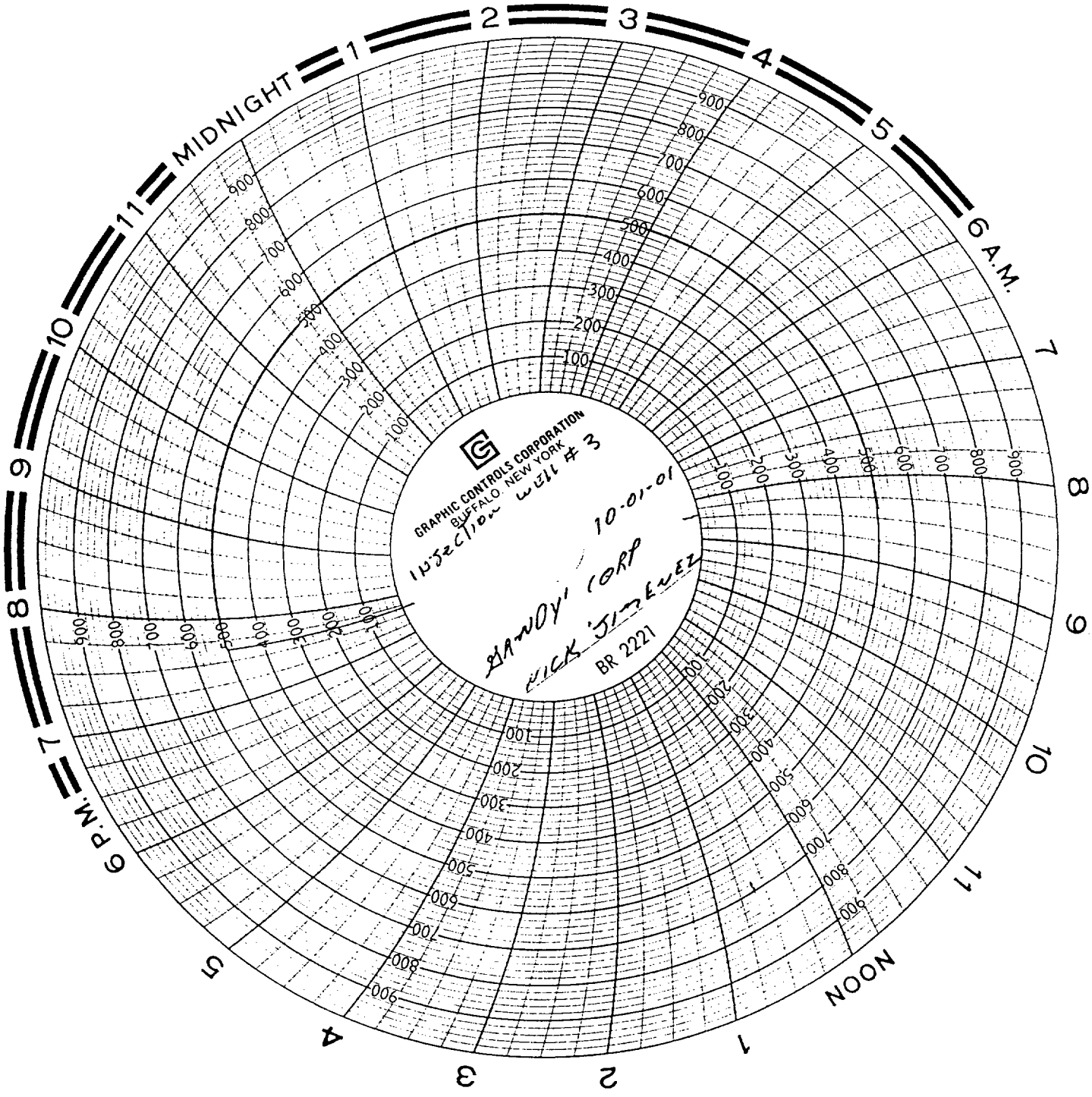
(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD
OCT 24 2001
ALEXIS C. SWOBODA
PETROLEUM ENGINEER

*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.


GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK
INJECTION WELL #3
10-01-01
DANDY CORP
NICK JIMENEZ
BR 2221
MIDNIGHT
6 A.M.
NOON
6 P.M.

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

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE *
(Other Instructions on reverse side)

OPERATOR'S COPY

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.
LC-029420-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.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1. OIL WELL ☐ GAS WELL ☐ OTHER WIW

7. UNIT AGREEMENT NAME
Skelly Unit

2. NAME OF OPERATOR
The Wiser Oil Company

8. WELL NO.
17

3. ADDRESS OF OPERATOR
P.O. Box 2568 Hobbs, New Mexico 88240 (505) 392-9797

9. API Well No.
30-015-05153

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface

660' FNL & 1930' FEL
Unit B

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. 15-T17S-R31E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3902' 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:				SUBSEQUENT 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	☐	ABANDONMENT *	☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other) Return Well to Injection.			■
(Other)				(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.)

*****THIS FORM IS IN RESPONSE TO NMOCD CASE NO. 12733

01/16/01 Return well to injection.

09/29/01 Test casing to 500 PSI (Copy of pressure chart attached, original to NMOCD).

Performed/witnessed by Nick Jimenez with Gandy Corporation

ACCEPTED FOR RECORD
OCT 25 2001
acs
ALEXIS C. SWOBODA
PETROLEUM ENGINEER

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

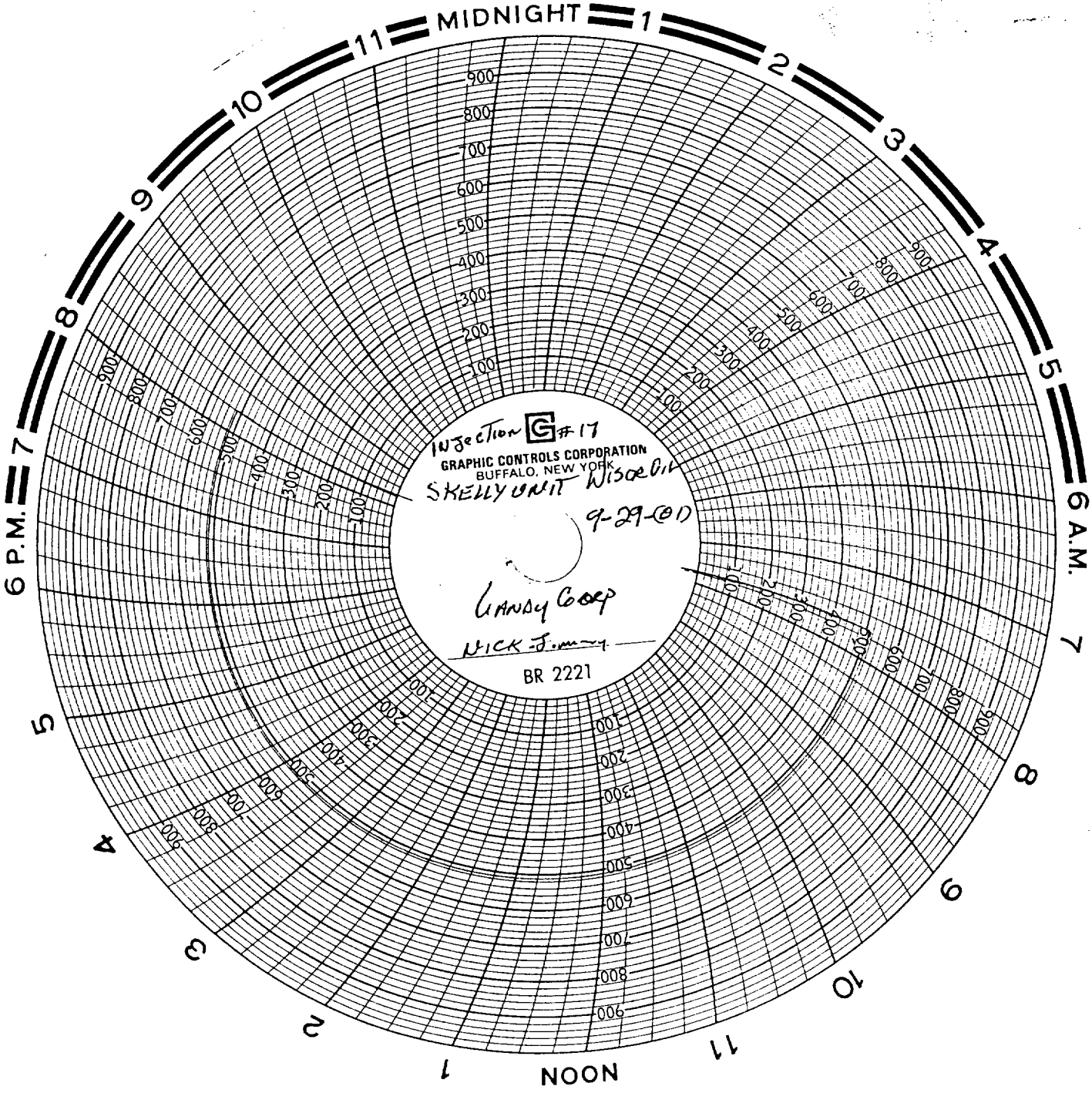
SIGNED Mary Jo Turner TITLE Production Tech II DATE September 29, 2001
Mary Jo Turner

(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.


MIDNIGHT
NOON
6 A.M.
6 P.M.
Injection #17
GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK
SKELLY UNIT Wisoe Oil
9-29-(01)
Gandy Corp
Nick Jimmy
BR 2221

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

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE (Other instructions on reverse side)

OPERATOR'S COPY

Budget Bureau No. 1004-0135
Expires August 31, 1985

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.)

5. LEASE DESIGNATION AND SERIAL NO.: LC-029420-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

1. OIL WELL [ ] GAS WELL [ ] OTHER WIW

7. UNIT AGREEMENT NAME: Skelly Unit

2. NAME OF OPERATOR: The Wiser Oil Company

8. WELL NO.: 18

3. ADDRESS OF OPERATOR: P.O. Box 2568 Hobbs, New Mexico 88240 (505) 392-9797

9. API Well No.: 30-015-05154

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 7-Rivers-QN-GB-SA

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: Sec. 15-T17S-R31E

14. PERMIT NO.:

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 3886' 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:				SUBSEQUENT 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	[ ]	ABANDONMENT *	[ ]
REPAIR WELL	[ ]	CHANGE PLANS	[ ]	(Other) Return Well to Injection			[■]
(Other)				(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.)*

*****THIS FORM IS IN RESPONSE TO NMOCD CASE NO. 12733

01/16/01 Return well to injection.

09/29/01 Test casing to 500 PSI (Copy of pressure chart attached, original to NMOCD).

Performed/witnessed by Nick Jimenez with Gandy Corporation

ACCEPTED FOR RECORD
OCT 25 2001
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 September 29, 2001

Mary Jo Turner

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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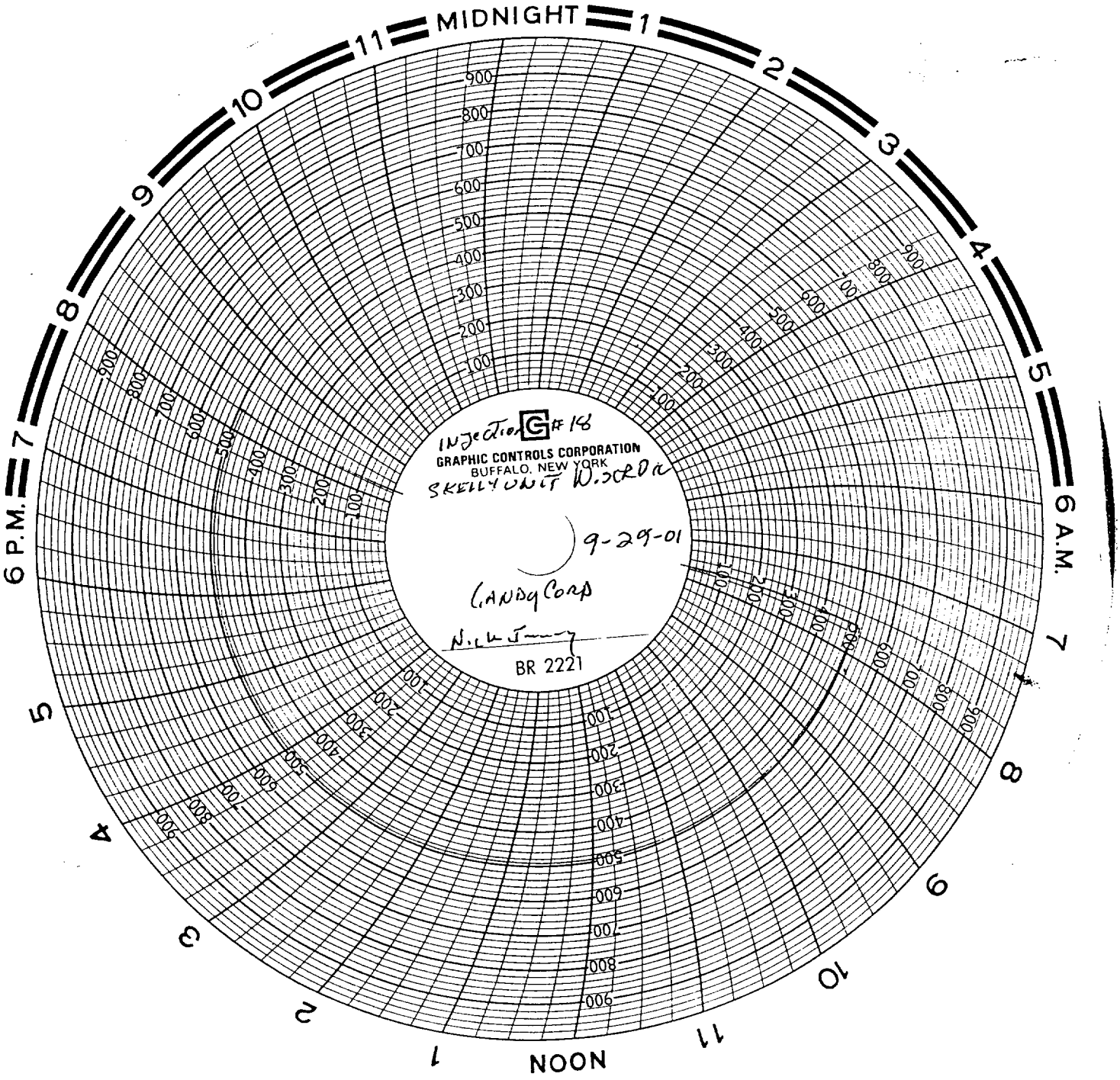
MIDNIGHT
NOON
6 A.M.
6 P.M.
Injection G #18
GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK
SKELLY UNIT W.SCRDR
9-29-01
LANDQ CORP
BR 2221

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

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE *
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Budget Bureau No. 1004-0135
Expires August 31, 1985

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.)

5. LEASE DESIGNATION AND SERIAL NO.
LC-029419-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1. OIL WELL [ ] GAS WELL [ ] OTHER WIW - TA

7. UNIT AGREEMENT NAME
Skelly Unit

2. NAME OF OPERATOR
The Wiser Oil Company

8. WELL NAME AND NO.
42

3. ADDRESS OF OPERATOR
P.O. Box 2568 Hobbs, New Mexico 88241

9. API WELL NO.
30-015-05356

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface

660' FNL & 1880' FEL
Unit B

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. 22-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:				SUBSEQUENT 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	[ ]	ABANDONMENT *	[ ]
REPAIR WELL	[ ]	CHANGE PLANS	[ ]	(Other) Temporary Abandon Status			[■]
(Other)				(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.)

Wiser Oil respectfully request Temporary Abandon status concerning the Skelly Unit # 42. Wiser is undergoing an internal review of the Skelly Unit lease. The course of action taken on the subject well is pending the future status of the Skelly Unit. A one year extension is necessary to fully explore all options available to Wiser at this time. The casing integrity test was ran and witnessed by Jim Amos - BLM 10/05/01, submitted 10/09/01.

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

SIGNED Mary Jo Turner TITLE Production Tech II DATE December 13,2001

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instruction On Reverse Side

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Operator's Copy

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

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE *
(Other Instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL 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.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1. OIL WELL [ ] GAS WELL [ ] OTHER WIW

7. UNIT AGREEMENT NAME
Skelly Unit

2. NAME OF OPERATOR
The Wiser Oil Company

8. WELL NO.
42

3. ADDRESS OF OPERATOR
P.O. Box 2568 Hobbs, New Mexico 88240 (505) 392-9797

9. API WELL NO.
30-015-05356

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface
660' FNL & 1880' FEL
Unit B

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. 22-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:				SUBSEQUENT 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	[ ]	ABANDONMENT *	[ ]
REPAIR WELL	[ ]	CHANGE PLANS	[ ]	(Other) Temporary Abandon			[■]
(Other)				(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.)*

10/01/01 MIRU Key Well Service. RU BOP. RIH w/4-1/2" AD-1 pkr. & 80 jts. 2-3/8" tbg. to 2257'. Set pkr. Test csg. to 500#. POH w/2-3/8" tbg. LD pkr.

10/02/01 RU Computalog WL. RIH w/4-1/2" CIBP. Could not pass 2300'. POH w/CIBP. RIH w/3-1/8" csg. guns. Could not pass 2300'. POH w/guns. RIH w/3-3/4" bit & 4-1/2" csg. scraper on 2-3/8" tbg. to 2519'. Rough scraping action from 2300'-2400'. POH w/tbg. LD tools. RIH w/4-1/2" CIBP. Cound not pass 2300'. POH w/CIBP. RIH w/3-1/8" guns. Could not pass 2300'. POH w/guns.

10/03/01 RU Computalog WL. RIH w/4-1/2" CIBP to 2100'. Set CIBP. Spotted 2 sks. cement on plug. RD WL. RIH w/2-3/8" tbg. to 2075'. Circulated 50 bbls. pkr. fluid. Pressure tested csg. to 500#. Would not hold. Leaking @ collar below WH. POH & LD 2-3/8" tbg. RD BOP. NU WH. RDMO.

10/05/01 Repaired WH. Ran csg. integrity chart. Witnessed by Jim Amos w/BLM. Well is TA.

Note to Operator:
Submit justification for TA status.

ACCEPTED FOR RECORD
DEC 10
CARLSBAD, NEW MEXICO

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

SIGNED Mary Jo Turner TITLE Production Tech II DATE October 9, 2001
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

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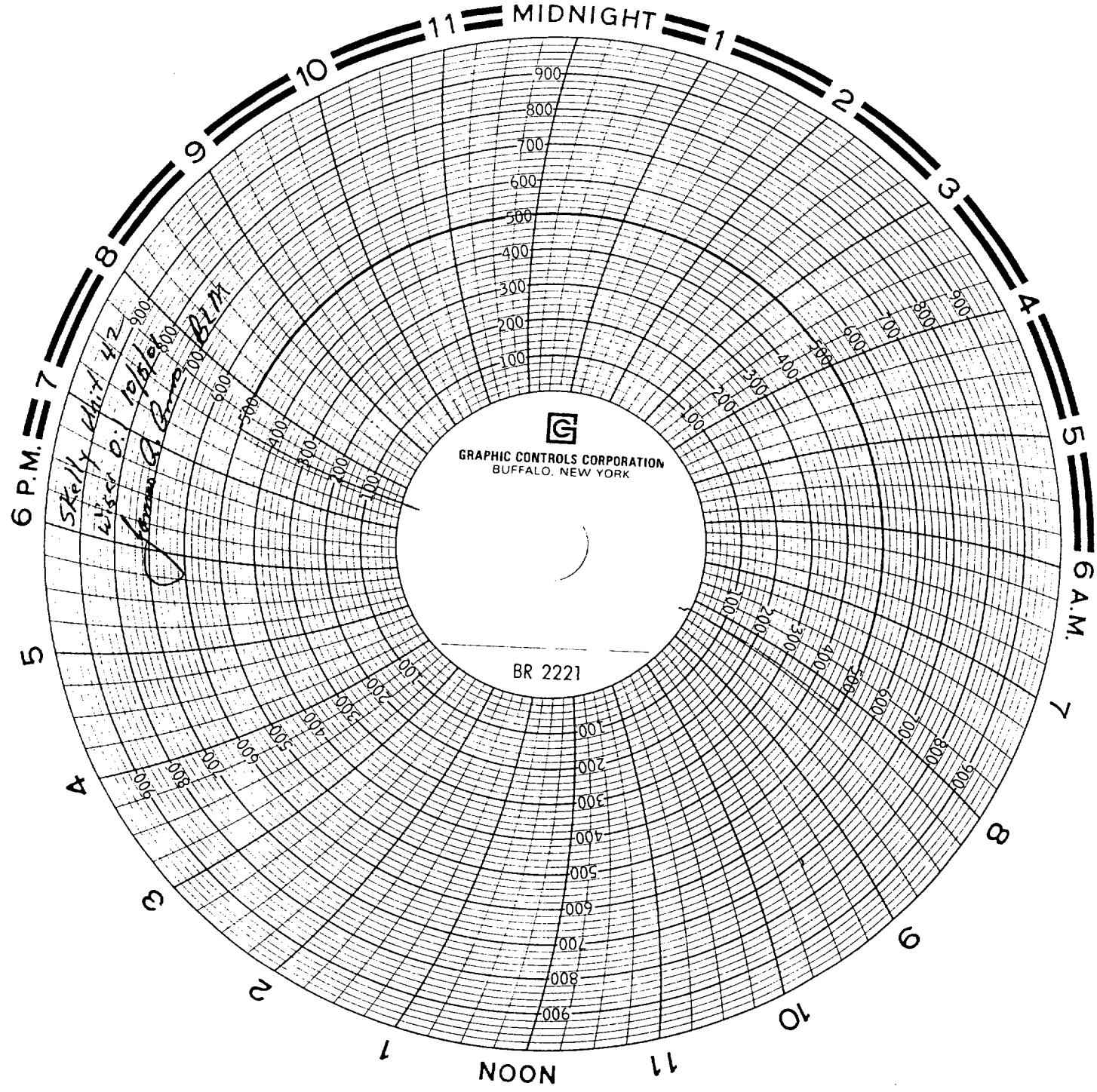

MIDNIGHT
NOON
6 A.M.
6 P.M.
GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK
BR 2221

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

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OPERATOR'S COPY

SUBMIT IN TRIPLICATE *
(Other Instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL 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.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1. OIL WELL ☐ GAS WELL ☐ OTHER WIW

7. UNIT AGREEMENT NAME
Skelly Unit

2. NAME OF OPERATOR
The Wiser Oil Company

8. WELL NO.
42

3. ADDRESS OF OPERATOR
P.O. Box 2568 Hobbs, New Mexico 88240 (505) 392-9797

9. API WELL NO.
30-015-05356

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface
660' FNL & 1880' FEL
Unit B

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. 22-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:				SUBSEQUENT 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	☐	ABANDONMENT *	☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other) _____			☐
(Other) Return well to injection				(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.)*

Wiser request approval to return well to injection by the procedure listed below. The intent will be to change from dual injection to single injection into Fren 7-Rivers. Will plug back Grayburg Jackson.

1. MIRU. TIH w/pkr. & set @ 2250'.
2. Pressure test the casing to 500#.
3. If the casing holds POH w/pkr.
4. TIH w/CIBP & set @ 2500'.
5. Perforate f/2178',79',89',94',98'-2200',83',85',95',2307',23',26',42',44',98' & 2400'.
6. TIH w/pkr. & 2-3/8" IPC tbg.
7. Acidize w/2000 gals. acid w/rock salt as diverter.
8. Flow well back.
9. Place well on injection.

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

SIGNED J. M. Jones TITLE Production Superintendent DATE September 26, 2001
Mike Jones

(This space for Federal or State office use)

APPROVED BY Alexis C. Swoboda TITLE PETROLEUM ENGINEER DATE OCT 24 2001
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.

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

UNITEL TATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICA... *
(Other Instructions on reverse side)

OPERATOR'S COPY

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL 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.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1. OIL WELL ☐ GAS WELL ☐ OTHER WIW

7. UNIT AGREEMENT NAME
Skelly Unit

2. NAME OF OPERATOR
The Wiser Oil Company

8. WELL NO.
42

3. ADDRESS OF OPERATOR
P.O. Box 2568 Hobbs, New Mexico 88240 (505) 392-9797

9. API WELL NO.
30-015-05356

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface

660' FNL & 1880' FEL
Unit B

10. FIELD AND POOL, OR WILDCAT
Grayburg Jackson Fren 7-Rivers QN-GB-SA

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.)
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:				SUBSEQUENT 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	☐	ABANDONMENT *	☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other)_____			☐
(Other)				(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.)*

4/17/01 MIRU Tyler Well Service. ND WH. RU BOP. RU reverse unit. RIH w/3-3/4" bit, 6 3-1/8" DC's & 2-3/8" tbg. Tagged CIBP @ 2153'. Drlled out CIBP. Circulated hole clen. Pulled to 2000'.

4/18/01 RIH to 253'. Tagged plug @ 2153'. Worked plug down to 2520'. Drilled 4 hrs making 8". Cicrculated hole clean. Pulled to 2000'.

4/19/01 POH w/2-3/8" tbg. & DC's. LD bit. RIH w/bit, DC's & 2-3/8" tbg. to 2518'. Drilled out to 2526'. Water flow 4 bbls. per hour. LD 2-3/8" tbg., DC's & bit. RU BOP. NU WH. Left well flowing to test tank. RDMO. Well is SI pending engineering study.

ACCEPTED FOR RECORD
OCT 24 2001
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 September 24, 2001
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.

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

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other Instructions on reverse side)

OPERATOR'S COPY

Budget Bureau No. 1004-0135
Expires August 31, 1985

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.)

5. LEASE DESIGNATION AND SERIAL NO.: LC-029419-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

1. OIL WELL [ ] GAS WELL [ ] OTHER WIW

7. UNIT AGREEMENT NAME: Skelly Unit

2. NAME OF OPERATOR: The Wiser Oil Company

8. WELL NO.: 45

3. ADDRESS OF OPERATOR: P.O. Box 2568 Hobbs, New Mexico 88240 (505) 392-9797

9. API Well No.: 30-015-05346

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
1980' FNL & 1980' FEL
Unit G

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. 22-T17S-R31E

14. PERMIT NO.:

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 3858' 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:				SUBSEQUENT 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	[ ]	ABANDONMENT *	[ ]
REPAIR WELL	[ ]	CHANGE PLANS	[ ]	(Other) Return Well to Injection			[■]
(Other)				(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.)*

*****THIS FORM IS IN RESPONSE TO NMOCD CASE NO. 12733

04/11/01 Return well to injection.

09/29/01 Test casing to 500 PSI (Copy of pressure chart attached, original to NMOCD).
Performed/witnessed by Nick Jimenez with Gandy Corporation

ACCEPTED FOR RECORD
OCT 24 2001
ALEXIS C. SWOBODA
PETROLEUM ENGINEER

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

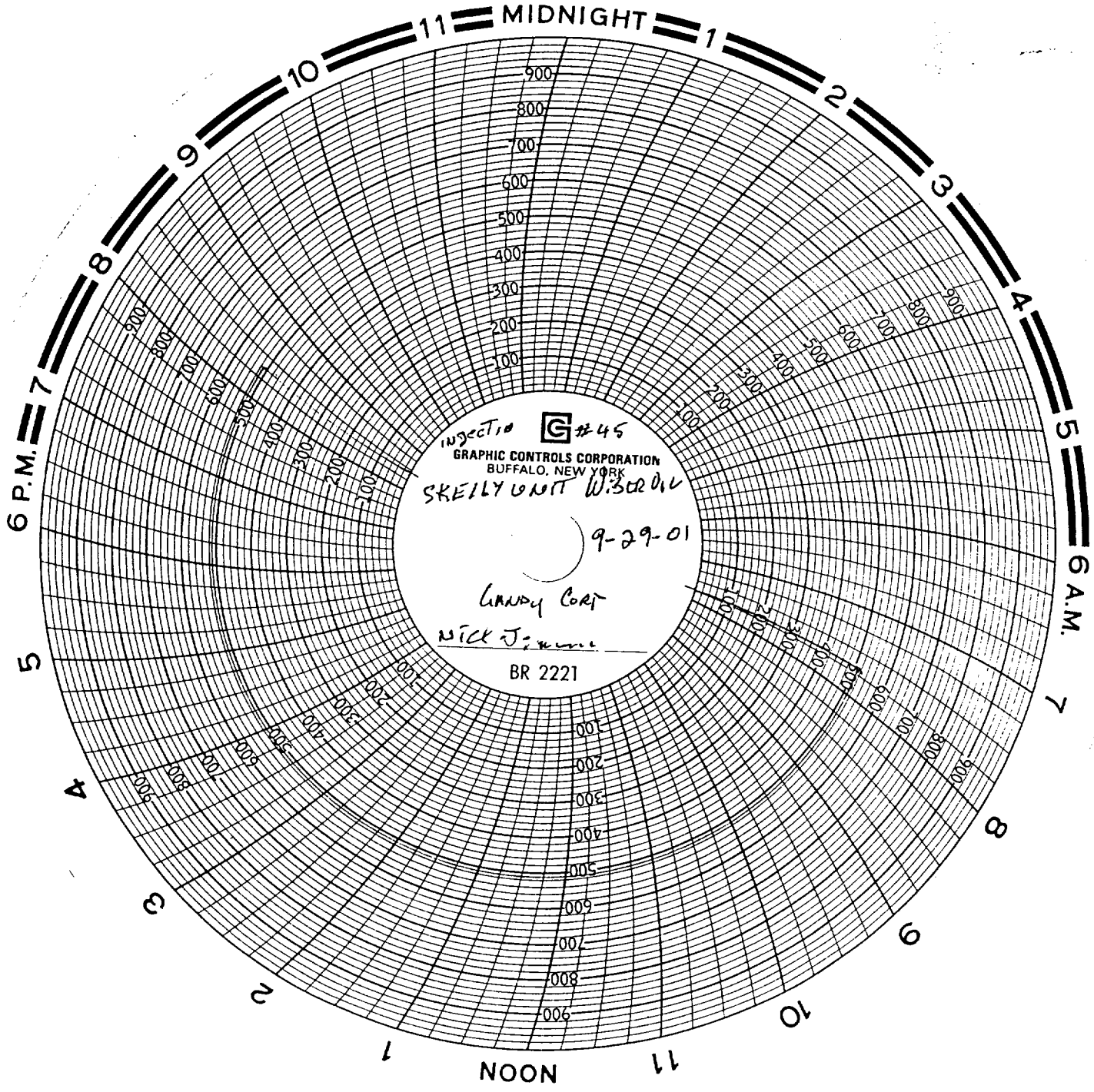
SIGNED Mary Jo Turner TITLE Production Tech II DATE September 29, 2001
Mary Jo Turner

(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.


MIDNIGHT
NOON
6 A.M.
6 P.M.
INJECTION #45
GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK
SKELLY UNIT W. SER DIV
9-29-01
CANDY CORT
NICK J.
BR 2221

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

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE (Other Instructions on reverse side)

OPERATOR'S COPY

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.
LC-029418-B

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.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1. OIL WELL ☐ GAS WELL ☐ OTHER WIW

7. UNIT AGREEMENT NAME
Skelly Unit

2. NAME OF OPERATOR
The Wiser Oil Company

8. WELL NO.
46

3. ADDRESS OF OPERATOR
P.O. Box 2568 Hobbs, New Mexico 88240 (505) 392-9797

9. API WELL NO.
30-015-05357

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface

1980' FNL & 560' FEL
Unit H

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. 22-T17S-R31E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3866' 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:				SUBSEQUENT 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	☐	ABANDONMENT *	☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other) Return Well to Injection			■
(Other)				(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.)*

*****THIS FORM IS IN RESPONSE TO NMOCD CASE NO. 12733

02/26/01 Return well to injection.

09/29/01 Test casing to 500 PSI (Copy of pressure chart attached, original to NMOCD).

Performed/witnessed by Nick Jimenez with Gandy Corporation

ACCEPTED FOR RECORD
OCT 25 2001
ALEXIS C. SWOBODA
PETROLEUM ENGINEER

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

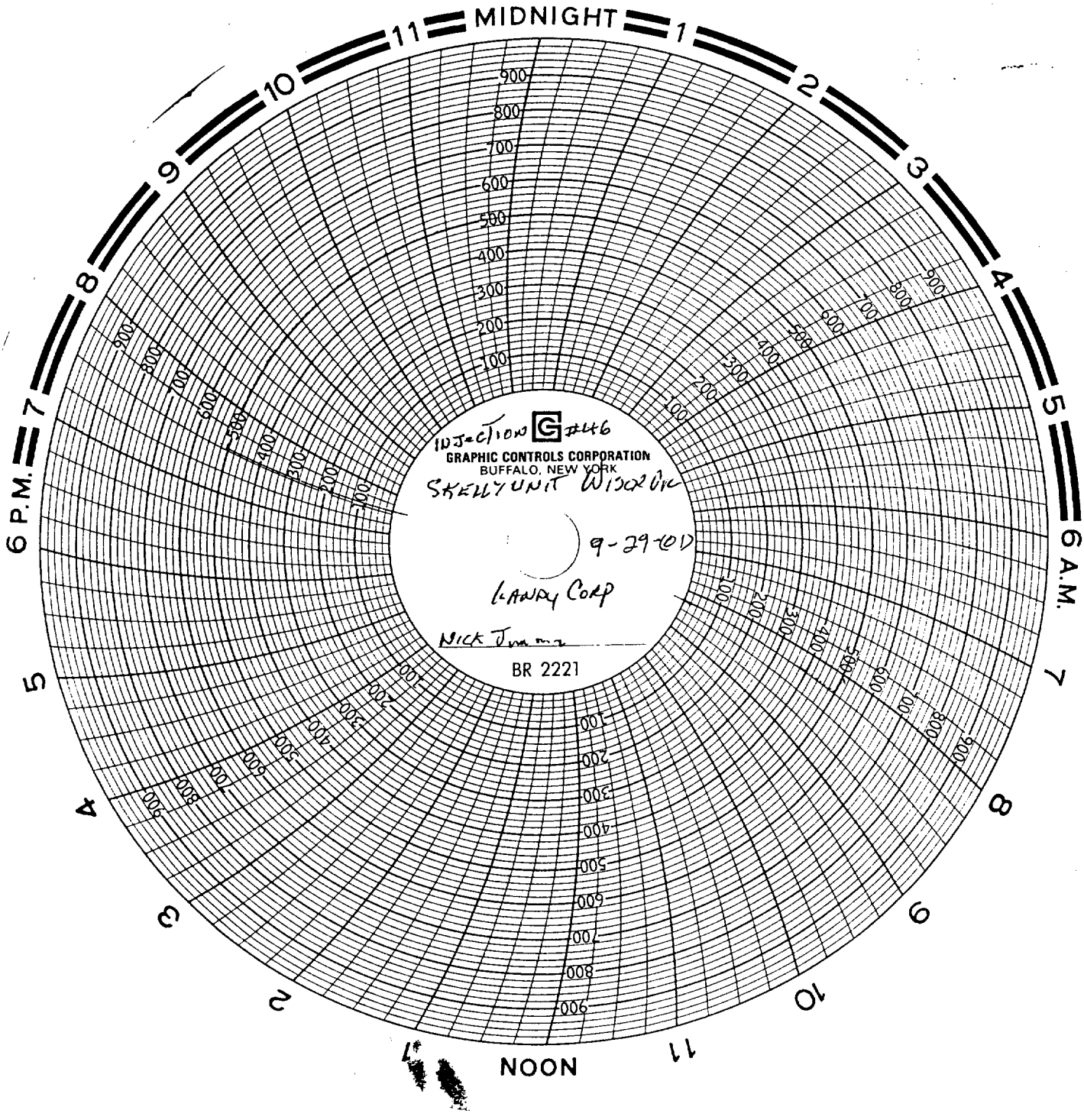
SIGNED Mary Jo Turner TITLE Production Tech II DATE September 29, 2001
Mary Jo Turner

(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.


MIDNIGHT
NOON
6 A.M.
6 P.M.
INJECTION #46
GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK
SKELLY UNIT WIDOR INC
9-29-01
LANRY CORP
NICK Jimmy
BR 2221

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

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OPERATOR'S COPY
SUBMIT IN TRIPLICATE
(Other Instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

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.)

5. LEASE DESIGNATION AND SERIAL NO.: LC-029418-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

1. OIL WELL [ ] GAS WELL [ ] OTHER WIW

7. UNIT AGREEMENT NAME: Skelly Unit

2. NAME OF OPERATOR: The Wiser Oil Company

8. WELL NO.: 47

3. ADDRESS OF OPERATOR: P.O. Box 2568 Hobbs, New Mexico 88240 (505) 392-9797

9. API Well No.: 30-015-05364

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
1980' FNL & 660' FWL
Unit E

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.): 3867' 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:				SUBSEQUENT 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	[ ]	ABANDONMENT *	[ ]
REPAIR WELL	[ ]	CHANGE PLANS	[ ]	(Other) Return Well to Injection			[■]
(Other)				(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.)*

*****THIS FORM IS IN RESPONSE TO NMOCD CASE NO. 12733

04/10/01 Return well to injection.

09/29/01 Test casing to 500 PSI (Copy of pressure chart attached, original to NMOCD).

Performed/witnessed by Nick Jimenez with Gandy Corporation

ACCEPTED FOR RECORD
OCT 24 2001
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 September 29, 2001
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

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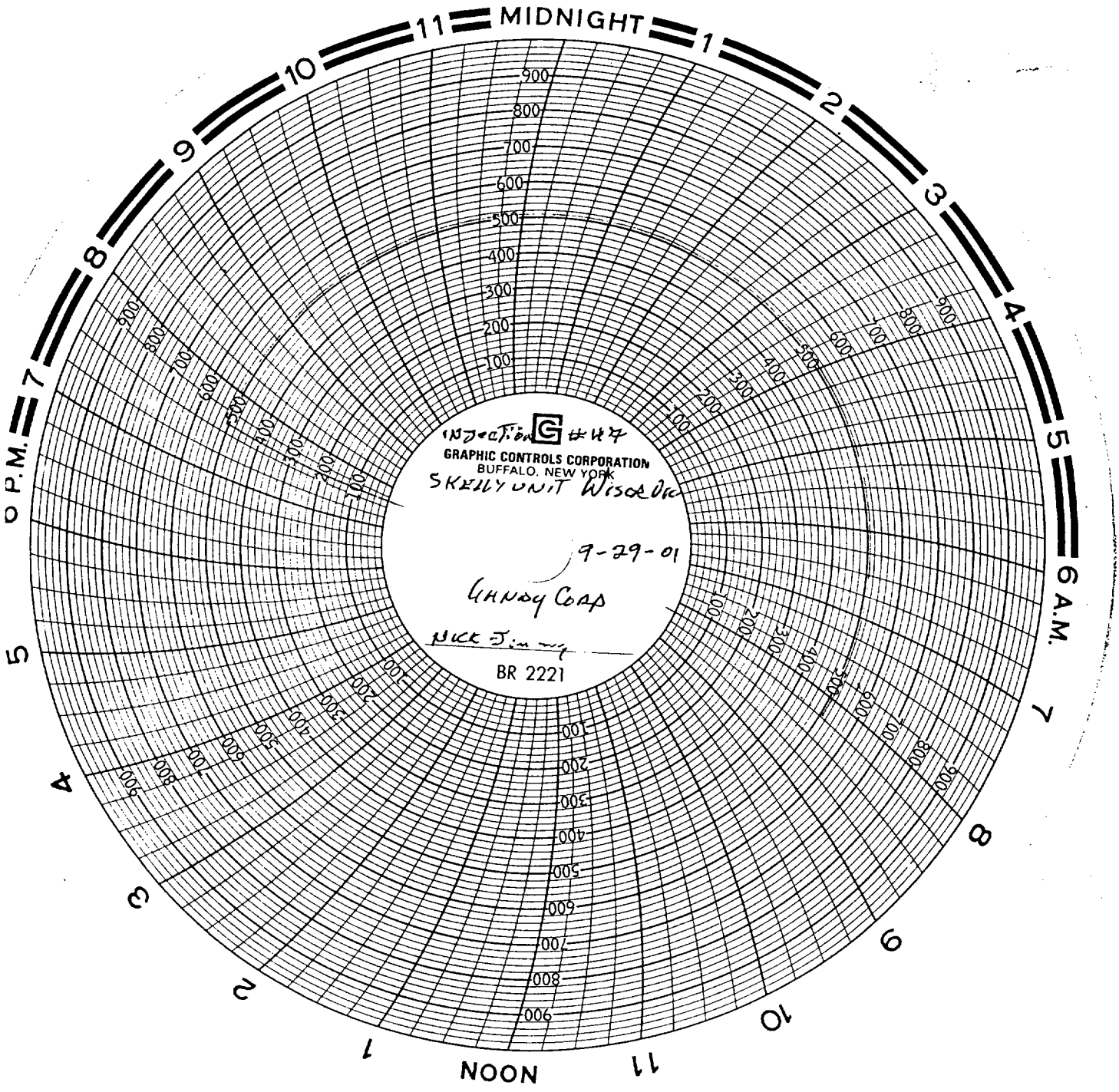

MIDNIGHT
NOON
6 A.M.
6 P.M.
INJECTION #47
GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK
SKELLY UNIT WISCOD
9-29-01
GANDY CORP
BR 2221

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

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other Instructions on reverse side)

OPERATOR'S COPY

Budget Bureau No. 1004-0135
Expires August 31, 1985

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.)

5. LEASE DESIGNATION AND SERIAL NO.: LC-029419-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

1. OIL WELL [ ] GAS WELL [ ] OTHER WIW

7. UNIT AGREEMENT NAME: Skelly Unit

2. NAME OF OPERATOR: The Wiser Oil Company

8. WELL NO.: 52

3. ADDRESS OF OPERATOR: P.O. Box 2568 Hobbs, New Mexico 88240 (505) 392-9797

9. API Well No.: 30-015-05345

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
1980' FSL & 1980' FEL
Unit J

10. FIELD AND POOL, OR WILDCAT: Grayburg Jackson

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.): 3839' 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:				SUBSEQUENT 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	[ ]	ABANDONMENT *	[ ]
REPAIR WELL	[ ]	CHANGE PLANS	[ ]	(Other) Return Well to Injection			[■]
(Other)				(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.)*

*****THIS FORM IS IN RESPONSE TO NMOCD CASE NO. 12733

02/07/01 Return well to injection.

09/29/01 Test casing to 500 PSI (Copy of pressure chart attached, original to NMOCD).

Performed/witnessed by Nick Jimenez with Gandy Corporation

ACCEPTED FOR RECORD
OCT 24 2001
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 September 29, 2001

Mary Jo Turner

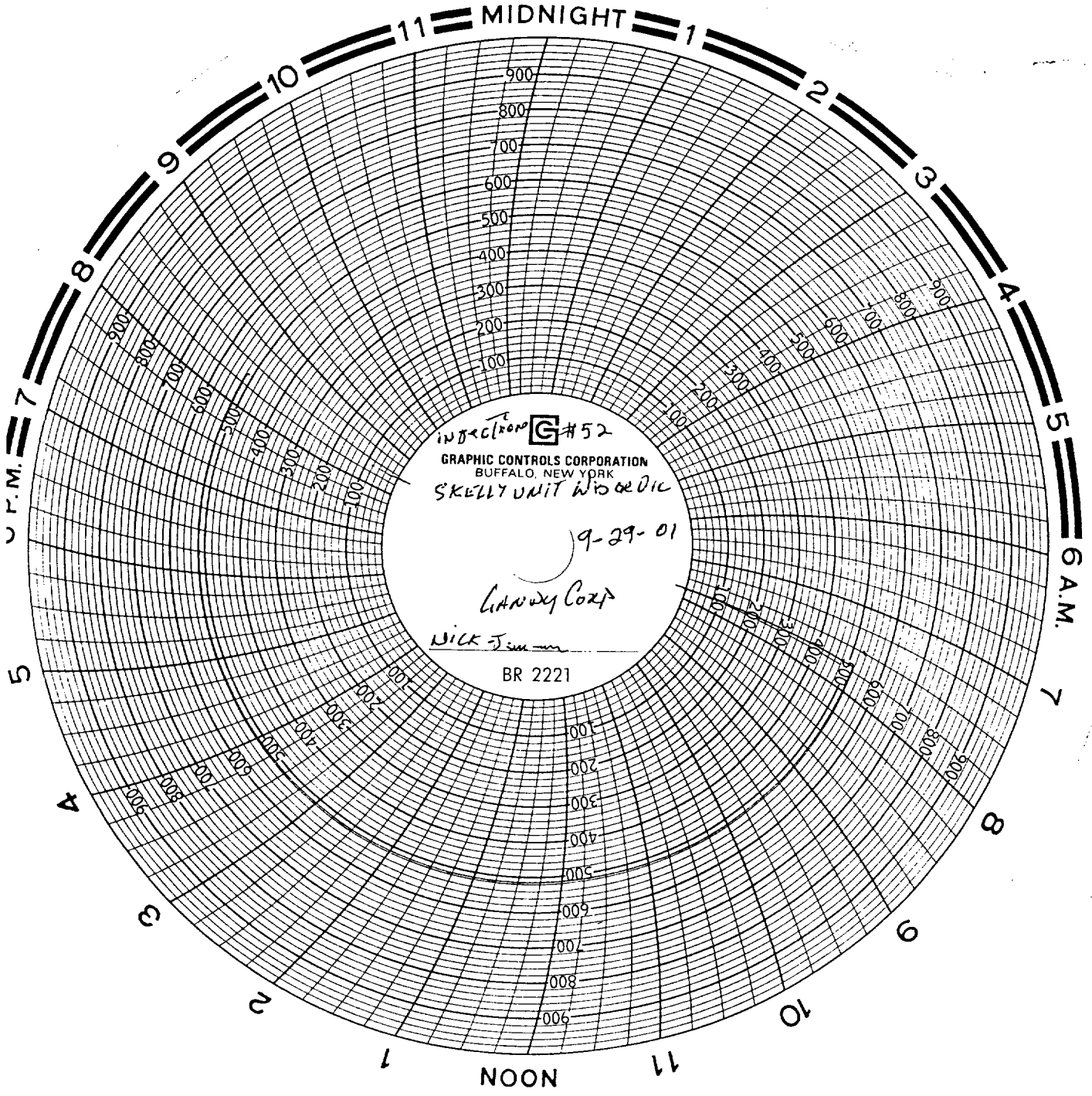
(This space for Federal or State office use)

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.


MIDNIGHT
NOON
6 A.M.
6 P.M.
INSTRUMENT #52
GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK
SKELLY UNIT W10 OR D1C
9-29-01
CANDY CORP
NICK Simm
BR 2221

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

UNITE! TATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OPER^ OR'S COPY

SUBMIT IN TRIPLIC.
(Other Instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL 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.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1. OIL WELL ☐ GAS WELL ☐ OTHER WIW

7. UNIT AGREEMENT NAME
Skelly Unit

2. NAME OF OPERATOR
The Wiser Oil Company

8. WELL NO.
56

3. ADDRESS OF OPERATOR
P.O. Box 2568 Hobbs, New Mexico 88240 (505) 392-9797

9. API WELL NO.
30-015-05350

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface

660' FSL & 1980' FWL
Unit N

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. 22-T17S-R31E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3835' 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:				SUBSEQUENT 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	☐	ABANDONMENT *	☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other) Return Well to Injection. (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)			
(Other)							

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.)*

*****THIS FORM IS IN RESPONSE TO NMOCD CASE NO. 12733

3/12/01 Return well to injection.

9/29/01 Test casing to 500 PSI (Copy of pressure chart attached, original to NMOCD).

Performed/witnessed by Nick Jimenez with Gandy Corporation

ACCEPTED FOR RECORD
OCT 24 2001
ALEXIS C. SWOBODA
PETROLEUM ENGINEER

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

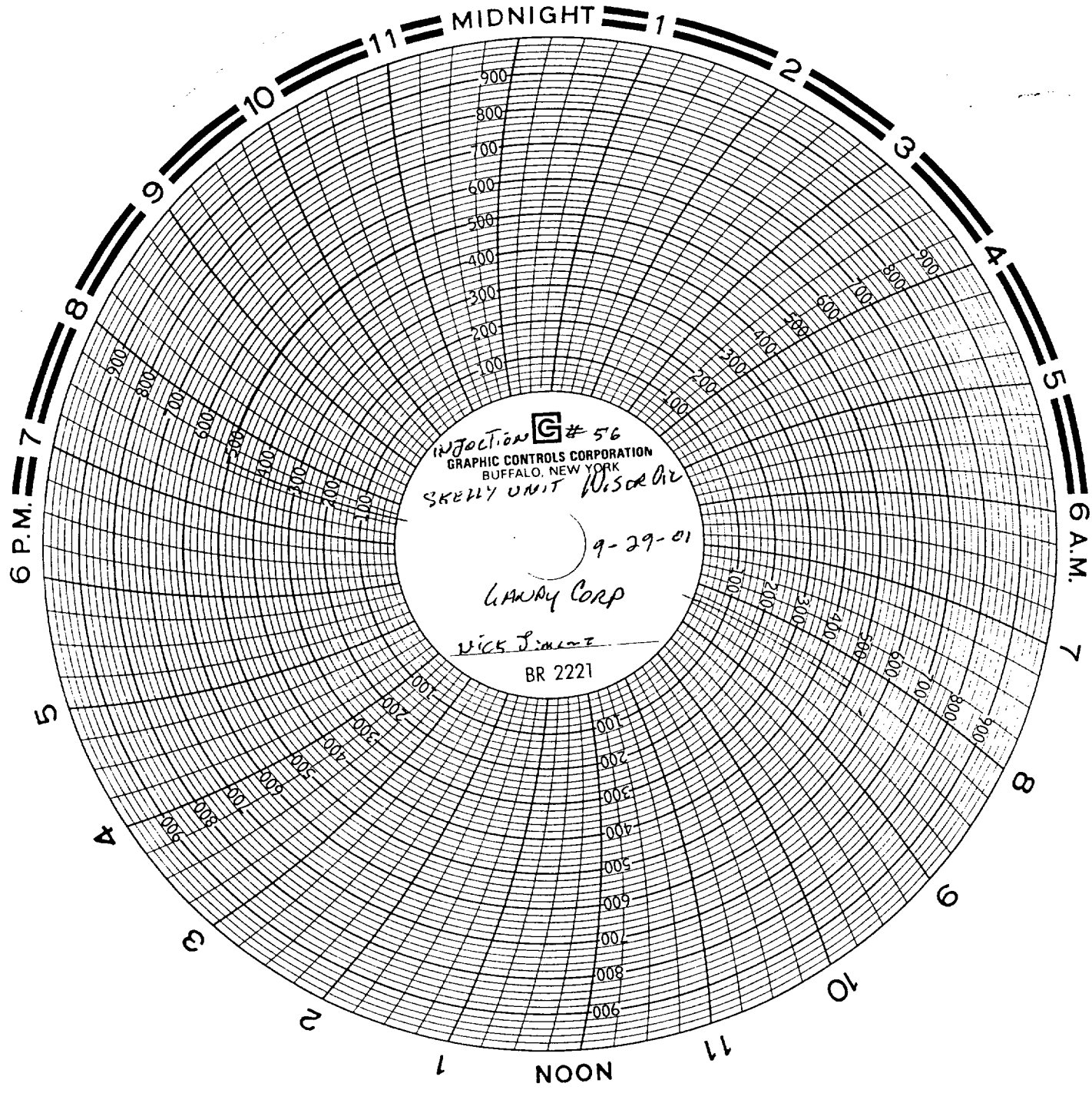
SIGNED Mary Jo Turner TITLE Production Tech II DATE September 29, 2001
Mary Jo Turner

(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.


MIDNIGHT
NOON
6 A.M.
6 P.M.
INJECTION #56
GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK
SKELLY UNIT
9-29-01
LAWRY CORP
BR 2221

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

UNITEL TATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other Instructions on reverse side)

ATOR'S COPY

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL 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.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1. OIL WELL ☐ GAS WELL ☐ OTHER WIW

7. UNIT AGREEMENT NAME
Skelly Unit

2. NAME OF OPERATOR
The Wiser Oil Company

8. WELL NO.
57

3. ADDRESS OF OPERATOR
P.O. Box 2568 Hobbs, New Mexico 88240 (505) 392-9797

9. API Well No.
30-015-05353

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface

660' FSL & 1980' FEL
Unit O

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. 22-T17S-R31E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3830' 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:				SUBSEQUENT 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	☐	ABANDONMENT *	☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other) Return Well to Injection.			■
(Other)				(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.)*

*****THIS FORM IS IN RESPONSE TO NMOCD CASE NO. 12733

02/08/01 Return well to injection.

09/29/01 Test casing to 500 PSI (Copy of pressure chart attached, original to NMOCD).

Performed/witnessed by Nick Jimenez with Gandy Corporation

ACCEPTED FOR RECORD
OCT 24 2001
ACS
ALEXIS C. SWOBODA
PETROLEUM ENGINEER

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

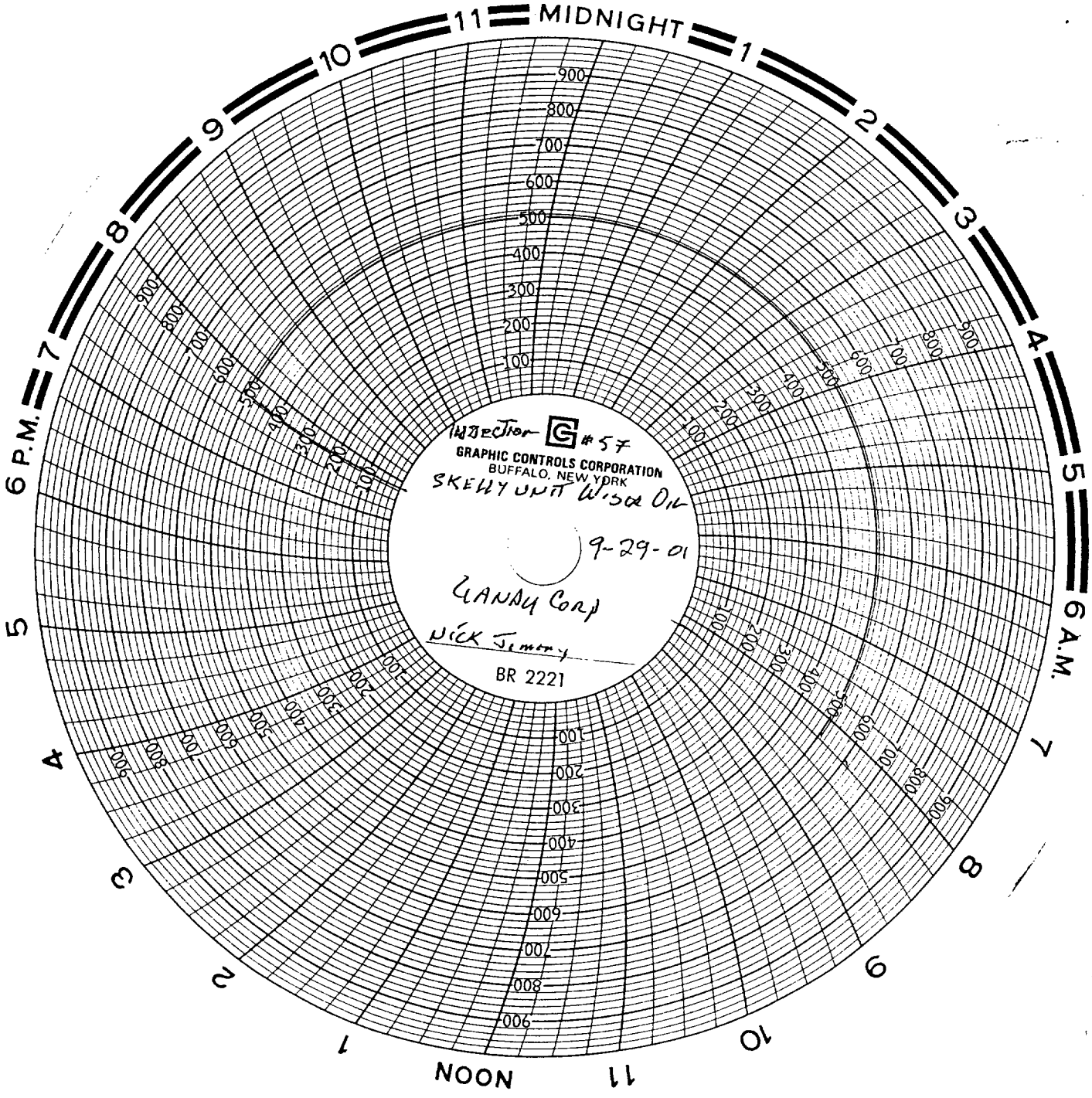
SIGNED Mary Jo Turner TITLE Production Tech II DATE September 29, 2001
Mary Jo Turner

(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.


MIDNIGHT
NOON
6 P.M.
6 A.M.
INJECTION #57
GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK
SKELLY UNIT W'SDE OIL
9-29-01
GANAY CORP
NICK JIMMY
BR 2221

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

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OPERATOR'S COPY

SUBMIT IN TRIPLICATE
(Other Instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

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.)

5. LEASE DESIGNATION AND SERIAL NO.
~~LC-029420-B~~ NM 98122

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1. OIL WELL ☐ GAS WELL ☐ OTHER WIW

7. UNIT AGREEMENT NAME
Skelly Unit

2. NAME OF OPERATOR
The Wiser Oil Company

8. WELL NO.
67

3. ADDRESS OF OPERATOR
P.O. Box 2568 Hobbs, New Mexico 88240 (505) 392-9797

9. API WELL NO.
30-015-05339

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
1650' FSL & 1980' FEL
Unit J

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. 21-T17S-R31E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3816' 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:				SUBSEQUENT 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	☐	ABANDONMENT *	☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other) Return Well to Injection			■
(Other)				(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.)*

*****THIS FORM IS IN RESPONSE TO NMOCD CASE NO. 12733

08/18/00 Return well to injection.

09/29/01 Test casing to 500 PSI (Copy of pressure chart attached, original to NMOCD).

Performed/witnessed by Nick Jimenez with Gandy Corporation

ACCEPTED FOR RECORD
OCT 25 2001
acs
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 September 29, 2001
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

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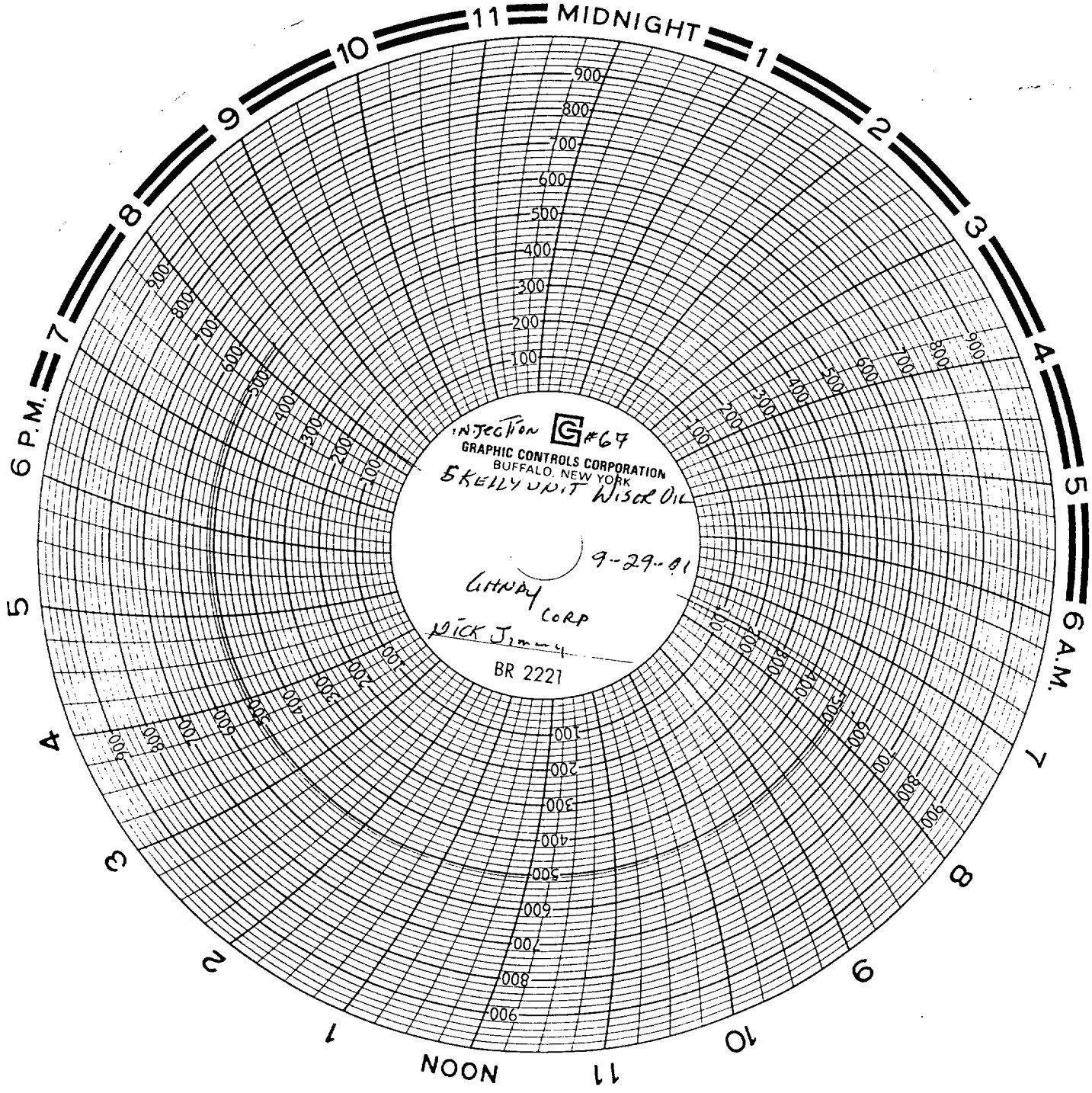
MIDNIGHT
NOON
6 A.M.
6 P.M.
INJECTION #67
GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK
BKELLY UNIT WISCR OIL
9-29-01
GANDY CORP
DICK JIMMY
BR 2221

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

SUBMIT IN TRIPLICATE
(Other Instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OPERATOR'S COPY

5. LEASE DESIGNATION AND SERIAL NO.
NM-98120

SUNDRY NOTICES AND REPORS 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.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1. OIL WELL ☐ GAS WELL ☐ OTHER WIW

7. UNIT AGREEMENT NAME
Skelly Unit

2. NAME OF OPERATOR
The Wiser Oil Company

8. API WELL NO.
30-015-05372

3. ADDRESS OF OPERATOR
P. O. Box 2568 Hobbs, New Mexico 88241

9. WELL NO.
72

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
1980' FSL & 1980' FWL
Unit K

10. FIELD AND POOL, OR WI
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.)	12. COUNTY OR PARISH	13. STATE
	3873' DF	Eddy	NM

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

NOTICE OF INTENTION TO:				SUBSEQUENT 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	☐	ABANDONMENT *	☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other) Casing Leak			■
(Other)				(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.)*

08/10/00 MIRU Key WS. Released pkr. & POH. RIH w/RBP & pkr. Set RBP @ 3000'.

08/11/00 Tested RBP to 1000# & csg. to 500#, held. Moved RBP to 3090'. Tested csg. to 500#, held. Tested csg. to 350# for 15 min. Loss of 5#. RIH w/retrieving tool. Released RBP. Pulled plug up hole 30'. Plug free. Reset RBP @ 3060'.

08/14/00 POH w/RBP. RU Computalog & perforated Grayburg f/3324'-29',58'-61',65'-67',94'-97',3400'-03',44'-50',76'-80',3518'-23',28'-30',36'-41', & 48'-51' w/2 SPF (102 holes). RD WL. RIH w/AD-1 pkr. on 100 jts. 2-3/8" tbg. Tbg. @ 3144'. ND BOP. NU WH.

08/15/00 POH w/tbg. Found hole in csg. @ 750'. LD AD-1 pkr. RIH w/Baker J-Lok pkr. & set @ 3144'. Dropped blanking plug & shut off water flow.

08/16/00 RIH w/tbg. Tagged sand @ 834'. RU Halliburton. Spotted 35 sks. Micro-Matrix cement. POH. LD tbg. ND WH. WOC

08/22/00 MIRU Key WS & reverse unit. RIH w/bit, DC's & 8 jts. 2-3/8" tbg. Tagged @ 436'. Drilled cmt. f/436'-683'. Circulated clean.

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

SIGNED Mary Jo Turner TITLE Production Tech II DATE April 9, 2001

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD
AUG 2 1 2001
ALEXIS C. SWOBODA
PETROLEUM ENGINEER

*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.

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

SUBMIT IN TRIPLICATE *
(Other Instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

OPERATOR'S COPY

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORS 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.)

5. LEASE DESIGNATION AND SERIAL NO.: NM-98120

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

1. OIL WELL [ ] GAS WELL [ ] OTHER WIW

7. UNIT AGREEMENT NAME: Skelly Unit

2. NAME OF OPERATOR: The Wiser Oil Company

8. API WELL NO.: 30-015-05372

3. ADDRESS OF OPERATOR: P. O. Box 2568 Hobbs, New Mexico 88241

9. WELL NO.: 72

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
1980' FSL & 1980' FWL
Unit K

10. FIELD AND POOL, OR WI: 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.): 3873' DF

12. COUNTY OR PARISH: Eddy

13. STATE: NM

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

NOTICE OF INTENTION TO:				SUBSEQUENT 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	[ ]	ABANDONMENT *	[ ]
REPAIR WELL	[ ]	CHANGE PLANS	[ ]	(Other) Casing Leak			[■]
(Other)				(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.)*

(continued)

08/23/00 Drilled f/683' to 776' & fell out of cement. RIH to 831'. Washed sand to 846'. Circulated clean. POH & LD collars. Tested csg. to 500#. Lost 12# in 15 minutes.

08/28/00 Notified OCD of intent to test at 1:00 p.m. Tested csg. to 360#. Pressure drop 30# in 30 minutes. State did not witness.

08/30/00 RU Pro Wireline. Pulled blanking plug. RU Hughes Services & acidized Grayburg Vacuum perfs. 3258'-3607' w/4000 gals. 15% I.S.A. acid & 4250# rock salt. Little block action. ATP 2800# @ 3.2 bpm. MTP 3200# @ 3.3 bpm. ISIP 2600#. 5 min. 2600#. 10 min. 2600#. 15 min. 2600#. RD Hughes. RU WH.

04/12/01 Injection rate 200 BWPD @ 950#.

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

SIGNED Mary Jo Turney TITLE Production Tech II DATE April 9, 2001

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instruction On Reverse Side

GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK
Skelly #7
500#
30 min.
4-12-01
BR 2221
Start
End
MIDNIGHT
6 A.M.
NOON
6 P.M.

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

UNITEI TATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICA
(Other Instructions on reverse side)

OPERATOR'S COPY
Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.
~~LC-029419-B~~ NM 98121

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.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1. OIL WELL ☐ GAS WELL ☐ OTHER WIW

7. UNIT AGREEMENT NAME
Skelly Unit

2. NAME OF OPERATOR
The Wiser Oil Company

8. WELL NO.
85

3. ADDRESS OF OPERATOR
P.O. Box 2568 Hobbs, New Mexico 88240 (505) 392-9797

9. API WELL NO.
30-015-05422

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
660' FNL & 1980' FEL
Unit B

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. 27-T17S-R31E

14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH	13. STATE
	3824' DF	Eddy County	NM

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

NOTICE OF INTENTION TO:				SUBSEQUENT 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	☐	ABANDONMENT *	☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other) Return Well to Injection			■
(Other)				(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.)*

*****THIS FORM IS IN RESPONSE TO NMOCD CASE NO. 12733

09/26/01 Return well to injection. (Seven Rivers)

09/29/01 Test casing to 500 PSI (Copy of pressure chart attached, original to NMOCD).

Performed/witnessed by Nick Jimenez with Gandy Corporation

ACCEPTED FOR RECORD
OCT 25 2001
acs
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 September 29, 2001
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

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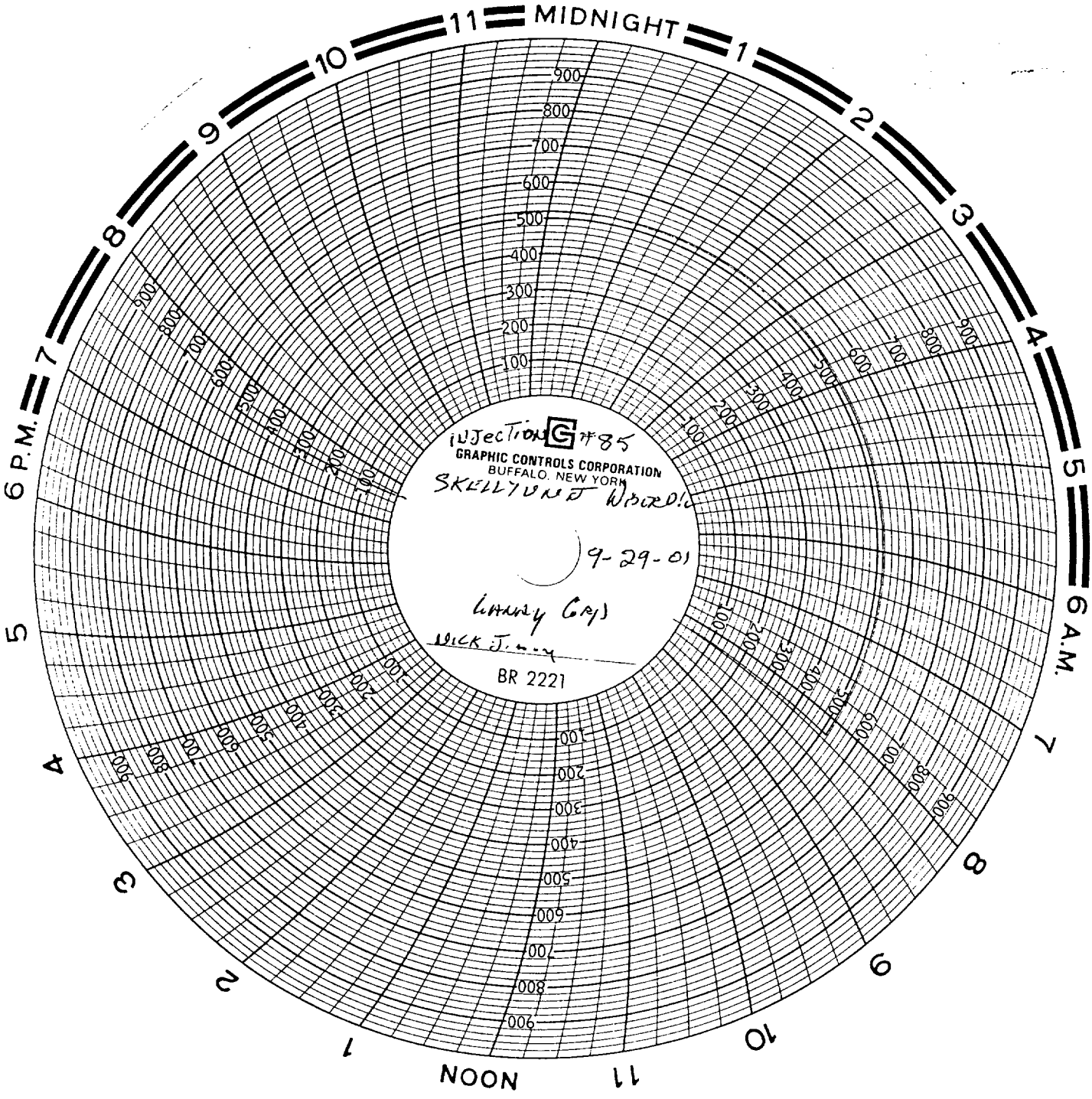

MIDNIGHT
NOON
6 A.M.
6 P.M.
INJECTION #85
GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK
SKELLYTOWN WORLD
9-29-01
BR 2221

OPERATOR'S COPY

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

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE *
(Other Instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.
~~LC-029418-B~~ NM 98122

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.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1. OIL WELL ☐ GAS WELL ☐ OTHER WIW

ACCEPTED FOR RECORD
OCT 25 2001
ALEXIS C. SWOBODA
PETROLEUM ENGINEER

7. UNIT AGREEMENT NAME
Skelly Unit

2. NAME OF OPERATOR
The Wiser Oil Company

8. WELL NAME AND NO.
89

3. ADDRESS OF OPERATOR
P.O. Box 2568 Hobbs, New Mexico 88241

9. API WELL NO.
30-015-05429

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

660' FNL & 1980' FEL
Unit B

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. 28-T17S-R31E

14. PERMIT NO

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3801' 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:				SUBSEQUENT 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	☐	ABANDONMENT *	☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other) Re-perf. GB-Vac. & acidized			■
(Other)				(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.)

7/11/01 MIRU Tyler Well Service. ND WH. RU BOP. Released 7" AD-1 pkr. POH w/65 jts. 2-3/8" IPC tbg. LD 7" pkr. RIH w/2-3/8" retrieving head & 2-7/8" work string to 3100'. Washed over & latched on to on-off tool on 7" Baker J-Lok pkr. Open by-pass and blew well down. Rec'd 200 bbls. fluid. Left csg. open overnight.

7/12/01 Closed by-pass & unset pkr. POH w/2-7/8" tbg. Did not have pkr. RIH w/2" short catch overshot on 2-7/8" tbg. Found pkr. @ 2960'. Latched onto pkr. POH w/2-7/8" tbg. LD tools & pkr. RIH w/6-1/4" cone bit & bit sub on 2-7/8" tbg. Tagged @ 3666'. POH w/2-7/8" tbg. LD bit & sub.

7/13/01 TIH with liner consisting of 4-1/2" shoe, float collar & 85 jts. 4-1/2" csg. TD @ 3653.61'. RU BJ Services. Circulated 130 bbls. pkr. fluid. Pumped 265 sks Class "C" cement Tailed w/225 sks. Class "C" cement containing 2% CaCl2. MTP 1830# @ 5 bpm. Bumped plug. Circulated 136 sks. to pit.

7/16/01 RIH w/2-7/8" tbg. Tagged cement @ 3630'. POH. LD all 2-7/8" tbg. RIH w/65 jts. 2-3/8" IPC tbg. Left hanging @ 245'. RD BOP. NU WH. RDMO

8/24/01 MIRU Tyler Well Service. ND WH. RU BOP. POH w/65 jts. 2-3/8" IPC tbg. RU Computalog WL & perforated Grayburg Vacuum f/3330',31',33',34',35',41'-43',58'-62',67'-71',81'-83',3442'-44',59'-61',64'-69',75'-79',82'-88',3514'-20',24'-28',32'-36' & 42'-45' w/2 SPF. RD WL. RIH w/4-1/2" AD-1 pkr. & 102 jts. 2-3/8" IPC tbg. to 3282'. Circulated 75 bbls. pkr. fluid. Set pkr. RD BOP. NU WH. Pressure tested csg. to 500# for 30 min. Held ok.

8/28/01 RU Cudd Pumping Service. Acidized Grayburg Vacuum 3330'-3545' w/4000 gals. 15% NE-FE acid w/2000# rock salt. Best block 750#. Best break 700#. ATP 2500# @ 3 bpm. MTP 3000# @ 4.0 bpm. ISIP 1800#. 5 min. 1680'. 10 min. 1620#. 15 min. 1600#. Flushed w/15 bbls. fresh water. RD Cudd. 1 hr. SI 1420#.
8/30/01 Injecting 150 BWPD @ 900#.

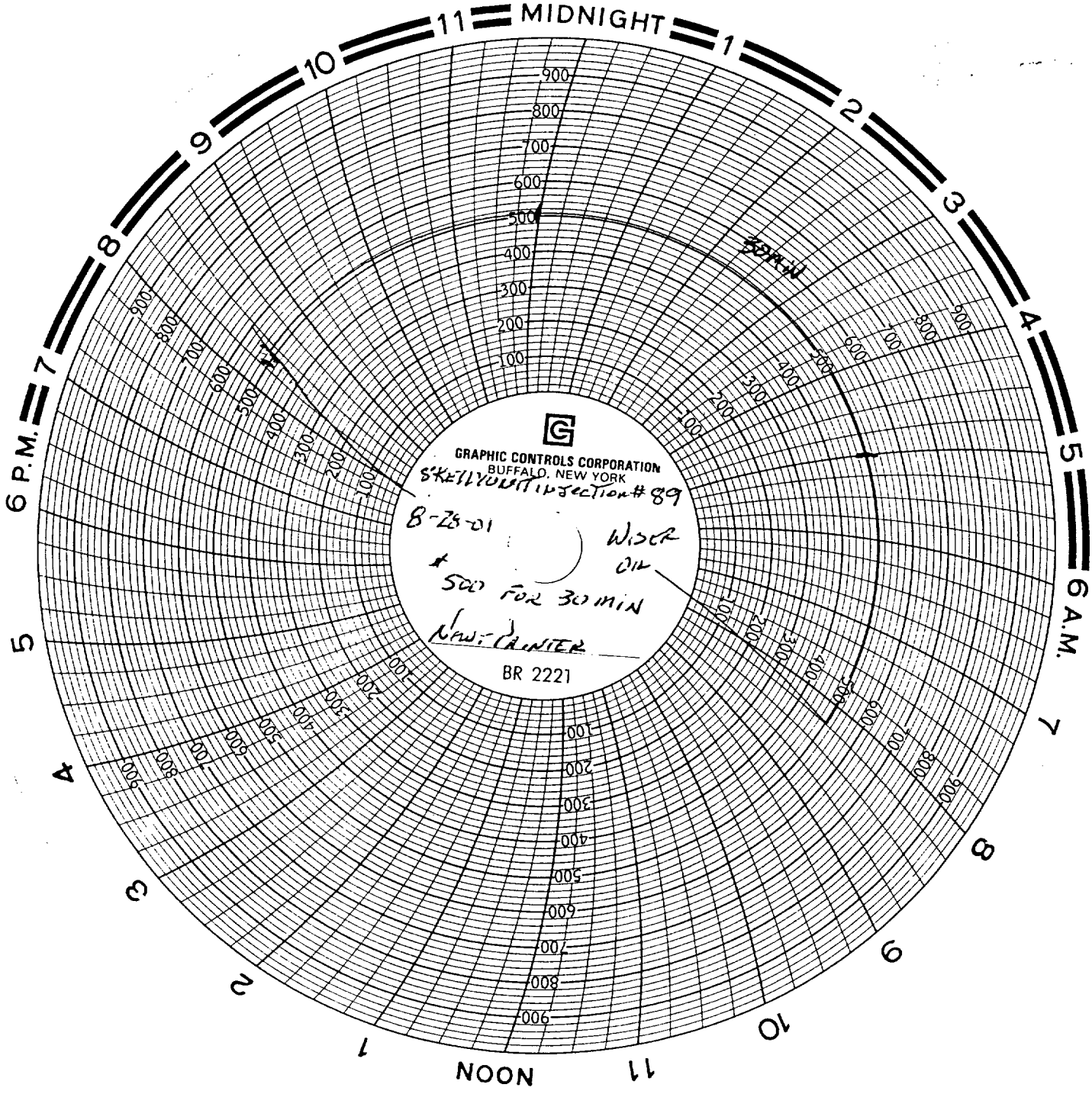
18. I hereby certify that the foregoing is true and correct.

SIGNED Mary Jo Turner TITLE Production Tech II DATE September 18, 2001

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instruction On Reverse Side


MIDNIGHT
NOON
6 A.M.
6 P.M.
GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK
SKELLYUNIT INJECTION #89
8-28-01
WATER
OIL
500 FOR 30 MIN
NAVI-CANTER
BR 2221

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

UNITE TATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OPERATOR'S COPY

SUBMIT IN TRIPLICATE *
(Other Instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

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.)

5. LEASE DESIGNATION AND SERIAL NO.
~~LC-029418-B~~ NM 98120

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1. OIL WELL ☐ GAS WELL ☐ OTHER WIW

7. UNIT AGREEMENT NAME
Skelly Unit

2. NAME OF OPERATOR
The Wiser Oil Company

8. WELL NO.
102

3. ADDRESS OF OPERATOR
P.O. Box 2568 Hobbs, New Mexico 88240 (505) 392-9797

9. API WELL NO.
30-015- 05147

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface

660' FNL & 1980' FEL
Unit B

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. 14-T17S-R31E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3929' 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:				SUBSEQUENT 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	☐	ABANDONMENT *	☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other) Return Well to Injection. (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)			■
(Other)							

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.)*

*****THIS FORM IS IN RESPONSE TO NMOCD CASE NO. 12733

3/09/01 Return well to injection.

9/29/01 Test casing to 500 PSI (Copy of pressure chart attached, original to NMOCD).

Performed/witnessed by Nick Jimenez with Gandy Corporation

ACCEPTED FOR RECORD
OCT 25 2001
ALEXIS C. SWOBODA
PETROLEUM ENGINEER

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

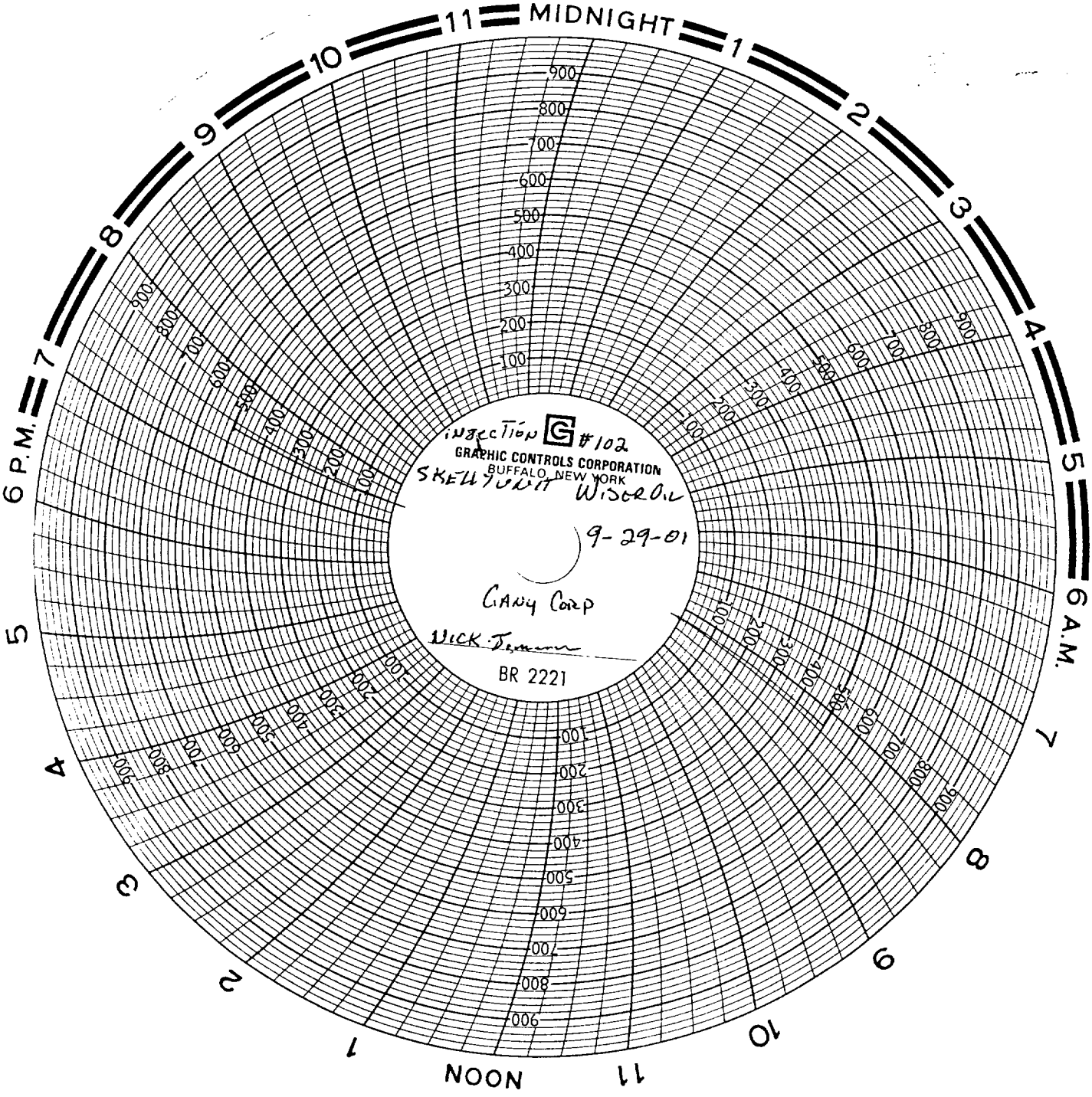
SIGNED Mary Jo Turner TITLE Production Tech II DATE September 29, 2001
Mary Jo Turner

(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.


MIDNIGHT
NOON
6 A.M.
6 P.M.
Injection #102
GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK
SKELLYUNIT WISCRON
9-29-01
CANY CORP
NICK
BR 2221

Form 160-5
(November 1983)
(Formerly 9-331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OPERATOR'S COPY

SUBMIT IN TRIPLICATE
(Other Instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

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.)

5. LEASE DESIGNATION AND SERIAL NO. ~~LC-029418-B~~ NM 98120

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1. OIL WELL ☐ GAS WELL ☐ OTHER WIW

7. UNIT AGREEMENT NAME: Skelly Unit

2. NAME OF OPERATOR: The Wiser Oil Company

8. WELL NO.: 103

3. ADDRESS OF OPERATOR: P.O. Box 2568 Hobbs, New Mexico 88240 (505) 392-9797

9. API WELL NO.: 30-015-05148

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
560' FNL & 1980' FWL
Unit C

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. 14-T17S-R31E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 3927' 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:				SUBSEQUENT 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	☐	ABANDONMENT *	☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other) Return Well to Injection			■
(Other)				(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.)*

*****THIS FORM IS IN RESPONSE TO NMOCD CASE NO. 12733

2/27/01 Return well to injection.

9/29/01 Test casing to 500 PSI (Copy of pressure chart attached, original to NMOCD).

Performed/witnessed by Nick Jimenez with Gandy Corporation

ACCEPTED FOR RECORD
OCT 25 2001
acs
ALEXIS C. SWOBODA
PETROLEUM ENGINEER

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

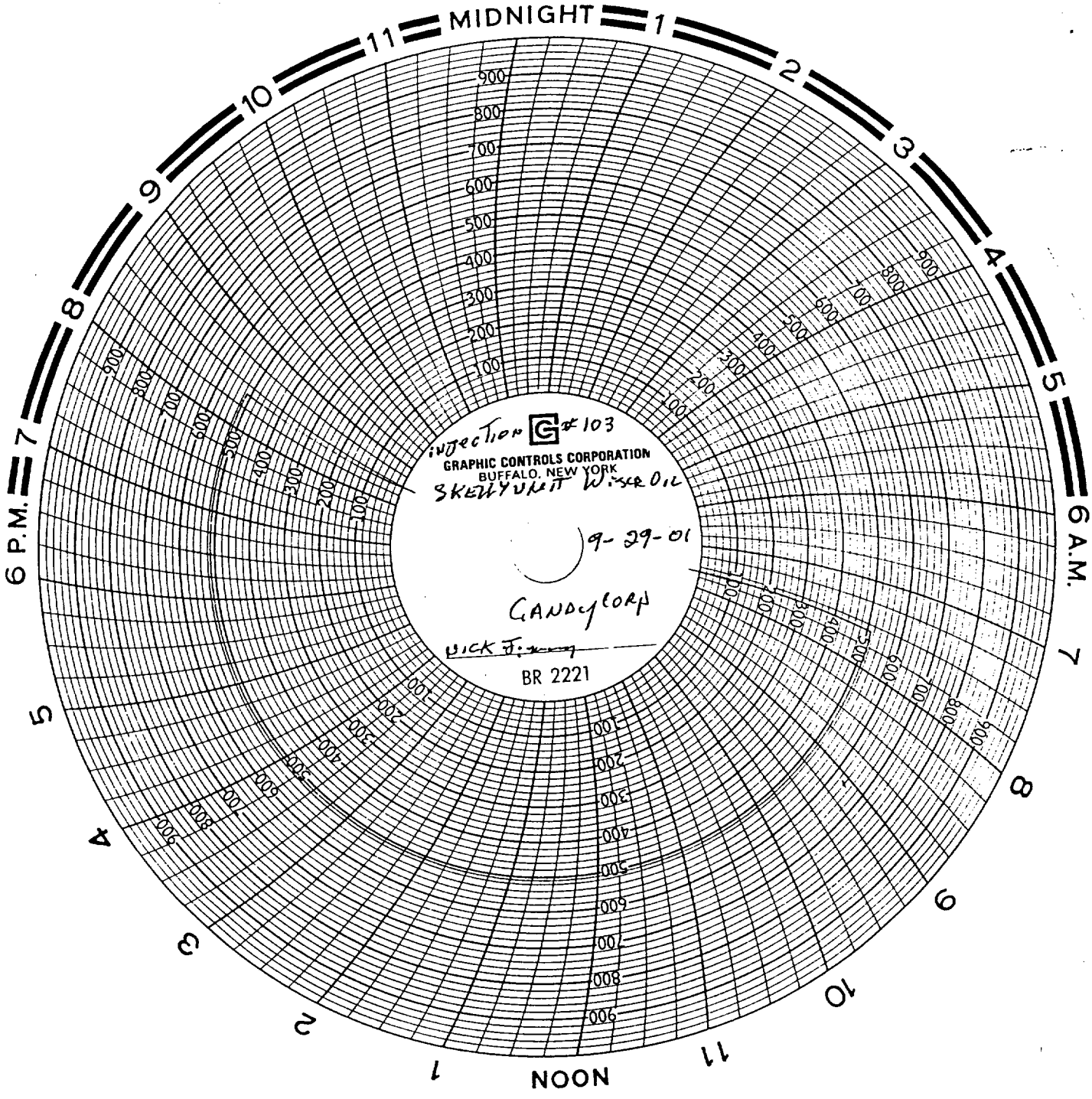
SIGNED Mary Jo Turner Mary Jo Turner TITLE Production Tech II DATE September 29, 2001

(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.


MIDNIGHT
NOON
6 A.M.
6 P.M.
Injection #103
GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK
SKELLYUNIT Wiser Oil
9-29-01
GANDY CORP
BR 2221

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

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other Instructions on reverse side)

OPERATOR'S COPY

Budget Bureau No. 1004-0135
Expires August 31, 1985

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.)

5. LEASE DESIGNATION AND SERIAL NO.: LC-029418-B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

1. OIL WELL ☐ GAS WELL ☐ OTHER WIW

7. UNIT AGREEMENT NAME: Skelly Unit

2. NAME OF OPERATOR: The Wiser Oil Company

8. WELL NO.: 105

3. ADDRESS OF OPERATOR: P.O. Box 2568 Hobbs, New Mexico 88240 (505) 392-9797

9. API WELL NO.: 30-015-05149

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
1980' FNL & 1980' FWL
Unit F

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. 14-T17S-R31E

14. PERMIT NO.:

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 3913' 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:				SUBSEQUENT 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	☐	ABANDONMENT *	☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other) Casing Integrity Test			■
(Other)				(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.)*

*****THIS FORM IS IN RESPONSE TO NMOCD CASE NO. 12733

09/29/01 Test casing to 500 PSI (Copy of pressure chart attached, original to NMOCD).

Performed/witnessed by Nick Jimenez with Gandy Corporation

ACCEPTED FOR RECORD
DEC 4
CARLSBAD, NEW MEXICO

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

SIGNED Mary Jo Turner TITLE Production Tech II DATE September 29, 2001

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.

MIDNIGHT
1
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NOON
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6 P.M.
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100
200
300
400
500
600
700
800
900
GRAPHIC CONTROLS CORPORATION
BR 2221

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

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

OPERATOR'S COPY

Budget Bureau No. 1004-0135
Expires August 31, 1985

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.)

5. LEASE DESIGNATION AND SERIAL NO.: LC-029419-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

1. OIL WELL [■] GAS WELL [ ] OTHER

7. UNIT AGREEMENT NAME: Skelly Unit

2. NAME OF OPERATOR: The Wiser Oil Company

8. WELL NO.: 123

3. ADDRESS OF OPERATOR: P.O. Box 2568 Hobbs, New Mexico 88241

9. API WELL NO.: 30-015-22257

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface
560' FSL & 660' FWL
Unit M

10. FIELD AND POOL, OR WILDCAT: Fren Seven 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.): 3812' GR

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:				SUBSEQUENT 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	[ ]	ABANDONMENT *	[ ]
REPAIR WELL	[ ]	CHANGE PLANS	[ ]	(Other) Return well to production			[■]
(Other)				(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.)

9/18/01 MIRU Key Well Service. ND WH. RU BOP. RIH w/4-3/4" bit & 5-1/2" scraper. RIH w/75 jts. 2-3/8" tbg. to 2360'. POH w/2-3/8" tbg. LD tools. RIH w/2-3/8" tbg. Tbg. @ 2360'. SN @ 2330'. RD BOP. NU WH.

9/19/01 RIH w/rods and 1-1/2" x 12' pump. Spaced well out. RDMO. Waiting on pump jack, flowline & electricity.

9/21/01 Install pump jack and flowline. Connected electricity. Left pumping to Battery.

ACCEPTED FOR RECORD
OCT 25 2001
acs
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 September 30, 2001

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instruction On Reverse Side

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

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE (Other Instructions on reverse side)

OPERATOR'S COPY

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.
~~LC-029420-B~~ NM 98122

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.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1. OIL WELL [ ] GAS WELL [ ] OTHER P & A

7. UNIT AGREEMENT NAME
Skelly Unit

2. NAME OF OPERATOR
The Wiser Oil Company

8. API No.
30-015-28140

3. ADDRESS OF OPERATOR
P.O. Box 2568 Hobbs, New Mexico 88241

9. WELL NO.
161

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface
1650' FSL & 2310' FWL Unit K

10. FIELD AND POOL, OR WILDCAT
San Andres - Grayburg

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 28-T17S-R31E

14. PERMIT NO

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3788' KB

12. COUNTY OR PARISH
Eddy County

13. STATE
N.M.

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

NOTICE OF INTENTION TO:				SUBSEQUENT 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	[ ]	ABANDONMENT *	[ ]
REPAIR WELL	[ ]	CHANGE PLANS	[ ]	(Other)			[ ]
(Other) Plug & Abandon				(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.)

Wiser Oil requests approval to Plug and Abondon the well by the procedure listed below.

SURFACE CASING: 11-3/4" set @ ~~570'~~ 653'
PRODUCTION CASING: 8-5/8" @ 5040'
PERFORATIONS: 3768'-3821'

1. TIH w/tbg. & tag cement @ CIBP.
2. Circulate abandonment mud to surface.
3. POH to 2000' and set ~~50'~~ 100' plug. SI
4. Tag cement plug.
5. POH to 900' and set ~~50'~~ 100' plug S.I.
6. Tag cement plug.
7. Perforate casing @ 550' and circulate cement to surface.
8. Set 50' cement plug @ surface.
9. Install dry hole marker.
10. Clean location.

APPROVAL SUBJECT TO GENERAL REQUIREMENTS AND SPECIAL STIPULATIONS ATTACHED

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

SIGNED H. M. Jones TITLE Superintendent DATE August 13,2001

(This space for Federal or State office use)

APPROVED BY Alexis C. Swobodak TITLE PETROLEUM ENGINEER DATE AUG 21 2001
CONDITIONS OF APPROVAL, IF ANY:

*See Instruction On Reverse Side

PLUGGING & ABANDONMENT WORKSHEET (3 STRING CSNG)

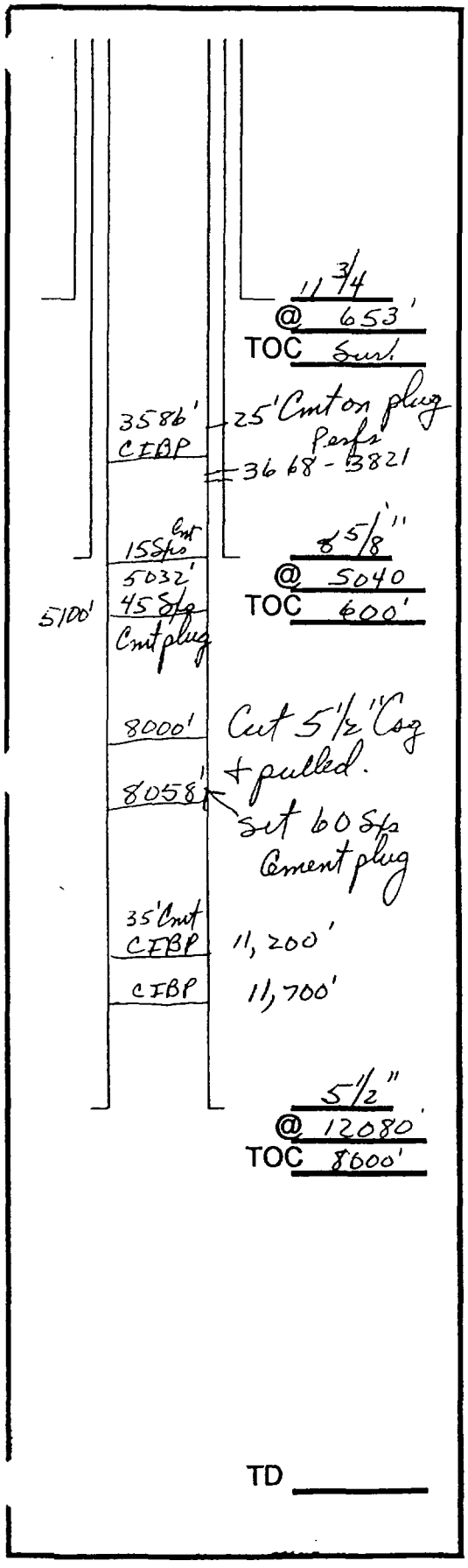
OPERATOR Thelwiser Oil Company
LEASENAME S Kelly Unit 161
WELL # 161

SECT	28	TWN	17S	RNG	31E
FROM	1650	N/S L	2310	E/W L	
TD:	12100'	FORMATION @ TD			
PBTD:	12080	FORMATION @ PBTD			

	SIZE	SET @	TOC	TOC DETERMINED BY
SURFACE	11 3/4	653	Surf.	
INTMED 1	8 5/8"	5040'	600'	TS
INTMED 2				
PROD	5 1/2"	12080	8100	TS

	SIZE	TOP	BOT	TOC	DETERMINED BY
LINER 1					
LINER 2					

	CUT & PULL @		TOP - BOTTOM
INTMED 1		PERFS	3668 - 3821
INTMED 2		OPENHOLE	-
PROD	5 1/2" @ 8000'		



* *REQUIRED PLUGS DISTRICT I*

RUSTLER (ANHYD)		*
YATES		
QUEEN		
GRAYBURG		
SAN ANDRES		
CAPITAN REEF		*
DELAWARE		
BELL CANYON		
CHERRY CANYON		
BRUSHY CANYON		
BONE SPRING		
GLORIETA		*
BLINEBRY		
TUBB		
DRINKARD		
ABO		
WC		
PENN		
STRAWN		
ATOKA		
MORROW		
MISS		
DEVONIAN		

PLUG	TYPE PLUG	SACKS CMNT	DEPTH
EXAMPLES			
PLUG # 1	OH	25 SXS	9850'
PLUG # 2	SHOE	50 SXS	8700'-8800'
PLUG #3	CIBP/35'		5300'
PLUG # 3	CIBP	25 SXS	5300'
PLUG # 4	STUB	50 SXS	4600'-4700'
PLUG # 6	RETNR SQZ	200 SXS	400
PLUG # 7	SURF	10 SXS	0-10'
PLUG #1	Cmt	60	8058'
PLUG # 2	Cmt	45	5100'
PLUG # 3	Cmt	15	5032
PLUG # 4	CIBP		3586'
PLUG # 5	Cmt	30	3561'
PLUG # 6			
PLUG # 7			
PLUG # 8			
PLUG # 9			
PLUG # 10			
PLUG #			
PLUG #			

BUREAU OF LAND MANAGEMENT
Roswell Field Office
2909 West Second Street
Roswell, New Mexico 88201
505-627-0272

Permanent Abandonment of Federal Wells
Conditions of Approval

Failure to comply with the following Conditions of Approval may result in a Notice of Incidents of Noncompliance (INC) in accordance with 43 CFR 3163.1.

1. Plugging operations shall commence within **thirty (30)** days from the approval date of this Notice of Intent to Abandon.

2. Notification: Contact the appropriate BLM office at least 24 hours prior to the commencing of any plugging operations. For wells in Chaves and Roosevelt County, call 505-627-0272, Eddy County call 505-234-5972; for wells in Lea County call 505-393-3612.

3. Blowout Preventers: A blowout preventer (BOP), as appropriate, shall be installed before commencing any plugging operation. The minimum BOP requirement is a 2M system for a well not deeper than 9,090 feet; a 3M system for a well not deeper than 13,636 feet; and a 5M system for a well not deeper than 22,727 feet.

4. Mud Requirement: Mud shall be placed between all plugs. Minimum consistency of plugging mud shall be obtained by mixing at the rate of 25 sacks (50 pounds each) of gel per 100 barrels of water. Minimum nine (9) pounds per gallon.

5. Cement Requirement: Sufficient cement shall be used to bring any required plug to the specified depth and length. Any given cement volumes on the proposed plugging procedure are merely estimates and are not final.

Unless otherwise specified in the approved procedure, the cement plug shall consist of either class "C", for up to 7,500 feet of depth, mixed at 14.8 lbs./gal. with 6.3 gallons of fresh water per sack or class "H", for deeper than 7,500 feet plugs, mixed at 16.4 lbs./gal. with 4.3 gallons of fresh water per sack.

6. Dry Hole Marker: All casing shall be cut-off at the base of the cellar or 3 feet below final restored ground level (whichever is deeper). The well bore shall then be capped with a 4-inch pipe, 10-feet in length, 4 feet above ground and embedded in cement. The following information shall be permanently inscribed on the dry hole marker: Well name and number, the name of the operator, the lease serial number, the surveyed location (the quarter-quarter section, section, township and range or other authorized survey designation acceptable to the authorized officer; such as metes and bounds).

7. Subsequent Plugging Reporting: Within 30 days after plugging work is completed, file one original and five copies of the Subsequent Report of Abandonment, Form 3160-5 to BLM. The report should give in detail the manner in which the plugging work was carried out, the extent (by depths) of cement plugs placed, and the size and location (by depths) of casing left in the well. **Show date well was plugged.**

8. Trash: All trash, junk and other waste material shall be contained in trash cages or bins to prevent scattering and will be removed and deposited in an approved sanitary landfill. Burial on site is not permitted.

Following the submission and approval of the Subsequent Report of Abandonment, surface restoration conditions of approval will be developed and furnished to you.

(rev. 5/30/2000)

acs -- coa.p&a

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

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OPERATOR'S COPY

SUBMIT IN TRIPLICATE
(Other Instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.
~~LC-029420-B~~ NM 98122

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.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1. OIL WELL [■] GAS WELL [ ] OTHER

7. UNIT AGREEMENT NAME
Skelly Unit

2. NAME OF OPERATOR
The Wiser Oil Company

8. API No.
30-015-28140

3. ADDRESS OF OPERATOR
P.O. Box 2568 Hobbs, New Mexico 88241

9. WELL NO.
161

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
1650' FSL & 2310' FWL Unit K

10. FIELD AND POOL, OR WILDCAT
Grayburg Jackson San Andres

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 28-T17S-R31E

14. PERMIT NO	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH	13. STATE
	3788' KB	Eddy County	N.M.

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

NOTICE OF INTENTION TO:				SUBSEQUENT 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	[ ]	ABANDONMENT *	[ ]
REPAIR WELL	[ ]	CHANGE PLANS	[ ]	(Other) Recompletion San Andres			[■]
(Other)				(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.)

06/05/01 MIRU Tyler WS. POH w/140 jts. 2-7/8" work string. RU reverse unit. ND WH. RU BOP. RIH bit, bit sub, DC's & 40 jts. 2-7/8" tbg.

06/06/01 Tagged cmt. @ 3590'. Drld. to 3620'. Tagged CIBP & drld. out. Fell to 3630'. Tagged 2nd CIBP & drld. to 3635'. Cleaned out to 4029'. Pulled to 3500'.

06/07/01 Computalog perforated Grayburg 3768'-90', 3802',03' & 21' w/2 SPF. RD WL. RIH w/8-5/8" pkr. on 2-7/8" tbg. to 3700'.

06/08/01 Hughes WS dropped stading valve & tested tbg. to 4500#. Spotted 200 gals. 15% NE-FE acid across perf. intervals. Set pkr. @ 3700'. Broke perfs. & found back side leaking @ 4000#. Pulled pkr. to 35,000# & leaked. Pkr. would not unset. Open by pass. S.I. well. RDMO.

06/11/01 MIRU Tyler WS. Worked pkr. free. POH w/tbg. & pkr. Left slips of pkr. in hole.

06/12/01 RIH w/AD-1 pkr. & 119 jts. 2-7/8" tbg. to 3825'. Hughes spotted 200 gals. 15% NE-FE acid across perf. Set pkr. @ 2732'. Broke perfs. @ 2500#. Acidized Grayburg f/3768'-3821' w/2500 gals. 15% NE-FE acid w/70 ball sealers. Good ball action. Best block 1000#. Best break 850#. ATP 2600# @ 2.8 bpm. MTP 3500# @ 3.2 bpm. ISIP 2400#. 5 min. 2260#. 10 min. 2220#. 15 min. 2190#. 1 hr. SI 2000#.

06/13/01 Unset pkr. POH w/2-7/8" tbg. LD 8-5/8" pkr. Shut BOP. Left csg. valve open to frac tank.

06/14/01 RU Computalog WL. RIH w/8-5/8" CIBP to 3586'. Set CIBP & capped w/25' cement. RD WL. RIH w/2-7/8" tbg. to 3550'. Circ. 140 bbls. pkr. fluid. LD work string.

18. I hereby certify that the foregoing

SIGNED Mary Jo Turner TITLE Production Tech II DATE August 13,2001

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD
AUG 21 2001
ACS
ALEXIS C. SWOBODA
PETROLEUM ENGINEER

*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.

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

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OPERATOR'S COPY

SUBMIT IN TRIPLICATE
(Other Instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.
~~LC-029420-B~~ NM 98122

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.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1. OIL WELL [■] GAS WELL [ ] OTHER

7. UNIT AGREEMENT NAME
Skelly Unit

2. NAME OF OPERATOR
The Wiser Oil Company

8. API No.
30-015-28140

3. ADDRESS OF OPERATOR
P.O. Box 2568 Hobbs, New Mexico 88241

9. WELL NO.
161

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface
1650' FSL & 2310' FWL Unit K

10. FIELD AND POOL, OR WILDCAT
Grayburg Jackson San Andres

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 28-T17S-R31E

14. PERMIT NO

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3788' KB

12. COUNTY OR PARISH
Eddy County

13. STATE
N.M.

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

NOTICE OF INTENTION TO:				SUBSEQUENT 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	[ ]	ABANDONMENT *	[ ]
REPAIR WELL	[ ]	CHANGE PLANS	[ ]	(Other) Recompletion San Andres			[■]
(Other)				(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.)

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06/06/01 Tagged cmt. @ 3590'. Drld. to 3620'. Tagged CIBP & drld. out. Fell to 3630'. Tagged 2nd CIBP & drld. to 3635'. Cleaned out to 4029'. Pulled to 3500'.

06/07/01 Computalog perforated Grayburg 3768'-90', 3802',03' & 21' w/2 SPF. RD WL. RIH w/8-5/8" pkr. on 2-7/8" tbg. to 3700'.

06/08/01 Hughes WS dropped stading valve & tested tbg. to 4500#. Spotted 200 gals. 15% NE-FE acid across perf. intervals. Set pkr. @ 3700'. Broke perfs. & found back side leaking @ 4000#. Pulled pkr. to 35,000# & leaked. Pkr. would not unset. Open by pass. S.I. well. RDMO.

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06/13/01 Unset pkr. POH w/2-7/8" tbg. LD 8-5/8" pkr. Shut BOP. Left csg. valve open to frac tank.

06/14/01 RU Computalog WL. RIH w/8-5/8" CIBP to 3586'. Set CIBP & capped w/25' cement. RD WL. RIH w/2-7/8" tbg. to 3550'. Circ. 140 bbls. pkr. fluid. LD work string

18. I hereby certify that the foregoing

SIGNED Mary Jo Turner TITLE Production Tech II DATE August 13,2001

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD
AUG 21 2001
ALEXIS C. SWOBODA
PETROLEUM ENGINEER

*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.

DAY
NIGHT
PRINTED IN U.S.A.
10/14/79
CH #1

OPERATOR'S COPY

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

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE *
(Other Instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

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.)

5. LEASE DESIGNATION AND SERIAL NO.: NM-98121

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

1. OIL WELL [ ] GAS WELL [ ] OTHER

7. UNIT AGREEMENT NAME: Skelly Unit

2. NAME OF OPERATOR: The Wiser Oil Company

8. WELL NO.: 264

3. ADDRESS OF OPERATOR: P.O. Box 2568 Hobbs, New Mexico 88241

9. API WELL NO.: 30-015-28999

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
20' FNL & 2619' FWL
Unit C

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. 27-T17S-R31E

14. PERMIT NO:

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 3815'

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:				SUBSEQUENT 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	[ ]	ABANDONMENT *	[ ]
REPAIR WELL	[ ]	CHANGE PLANS	[ ]	(Other) Return well to production			[■]
(Other)				(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.)*

9/19/01 MIRU Key Well Service. ND WH. RU BOP. RIH w/4-3/4" bit, 5-1/2" scraper & 83 jts. 2-3/8" tbg. to 2545'. POH w/2-3/8" tbg. LD tools. RIH w/AD-1 pkr., SN & 82 jts. 2-3/8" tbg. Set pkr. @ 2515'. RU swab. Set pkr. @ 2300'. FFL 1000'.

9/20/01 Set pkr. @ 2410'. RU swab. FFL 2000'. POH w/2-3/8" tbg. LD tools. RIH w/2-3/8" tbg. Tbg. @ 2497'. SN @ 2465'. RD BOP. NU WH.

9/21/01 RIH w/rods and 1-1/2" x 12' pump. Hung well on. Left open to SU Battery "B". RDMO. Waiting on electric motor repair.

9/26/01 Connected electricity. Left well pumping to Battery "B".

ACCEPTED FOR RECORD
OCT 25 2001
acs
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 September 28, 2001

(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.