

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other Instructions on
reverse side)

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

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT - " for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM-998122	
2. NAME OF OPERATOR The Wiser Oil Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P.O. Box 2568 Hobbs, New Mexico 88241		7. UNIT AGREEMENT NAME Skelly Unit	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 2610' FSL & 150' FEL Unit I		8. WELL NAME AND NO. 149	
		9. API WELL NO. 30-015-25037	
		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.) 3424' GR	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:

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

(Other) Plug and Abandon

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/>	

(Note: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS: (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

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

Surface Casing: 8-5/8" set @ 509'.

Production Casing: 5-1/2" set @ 3900' 17#

1. TIH to 3100' and tag CIBP. Circulate abandonment mud.
2. Spot 50' plug on CIBP.
3. Tag cement plug.
4. TIH with CIBP and set @ 2150'.
5. Spot 50' cement on top of CIBP.
6. Tag cement.
7. Spot 50' cement plug @ 1600'.
8. Tag cement.
9. Spot 50' cement plug @ 550'.
10. Tag cement.

11. Spot 50' cement plug to surface.
12. Install dry hole marker.
13. Clean location.

Accepted for record - NMOC

APPROVAL SUBJECT TO
GENERAL REQUIREMENTS AND
SPECIAL STIPULATIONS ATTACHED

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

SIGNED L. M. Jones TITLE Superintendent DATE April 8, 2002

(This space for Federal or State office use)

APPROVED BY FORIC. SGD. ALEXIS C. SWCBODA DATE APR 10 2002

CONDITIONS OF APPROVAL, IF ANY:

*See Instruction On Reverse Side