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

## UNITE STATES DEPARTMENT OF THE INTERIOR

SUBMIT IN TRIPLIC. . . . \*

(Other Instructions on

Oil Cons.
N.M. DIV-Dist. 2135 d S 7
301 While rand Avenue

(Formerly 9-331)	BUREAU OF LAND MANAGEMENT (contained in reverse side )							57 LEASE PROGRAMMON AND SEMAL NO. LC-029419-A					
SU (Do not	use this form	for proposals to	AND REPOR	back to a di	fferent r	LS eservoir.		6. IF I	NDIAN	, ALLOTTEE OR TRI	BE NAME		
OIL WELL	WELL WELL \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\								7. UNIT AGREEMENT NAME Skelly Unit				
2. NAME OF OPERATOR  The Wiser Oil Company  ADDRESS OF OPERATOR									8. WELL NO. 156				
3. ADDRESS OF OPERATOR P.O. Box 2568 Hobbs, New Mexico 88240 (505) 392-9797 OCD - ARTESIA									9. API Well No. 30-015-25038				
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  See also space 17 below.)  At surface									10. FIELD AND POOL, OR WILDCAT Fren Seven Rivers				
2560' FSL & 2630' FEL Unit J									11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 22-T17S-R31E				
14. PERMIT NO.	IS. ELEVATIONS (Show whether DF, RT, GR, etc.) 3845' GR							12. COUNTY OR PARISH Eddy County 13. STATE NM					
16.	Ch	eck Approp	oriate Box to indicat	e Nature	of Not	ice, Report,	or Other	Data					
NOTICE OF INTENTION TO:								BSEQUENT REPORT OF:					
TEST WATER SHUT	T OFF	PULI	OR ALTER CASING		WAT	ER SHUT-OF	F			REPAIRING WELL			
FRACTURE TREAT	·	MUL	TIPLE COMPLETE	<u> </u>	FRA	CTURE TREAT	TMENT	H		ALTERING CASING	•		
SHOOT OR ACIDIZ	E $\square$	ABA	NDON*		SHO	OTING OR AC	CIDIZING			ABANDONMENT *			
REPAIR WELL	(Note: Report rest							s of multiple completion on Well					
(Other)  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS: (Clearly state all pertinent details, a										nd Log form.) nated date of starting an	v		
proposed work. If	well is direction	onally drilled,	give subsurface locations	and measure	d and tr	ie vertical depth	s for all ma	arkers a	nd zone	es pertinent to this work	<b>)</b> •		
			w/2-3/8" tbg. RIH w/4-3/4" bi										
			g, DC's & bit. RIH w/pkr. & 2 bpm. MTP 3353#@ 4.5 bpm										
2-3/8" tbg. & pkr.	2 1/9" the Sat r	oler Class BOD 8	r secure well @ 3346' PD										
5/14/96 RIH w/3-1/2" pkr. & 5/15/96 RU HES & frac'd w/			6/30 Brown sand. ATP 4200#	@ 31.5 bpm.	MTP 428	8#@37 bpm. ISI	DP 2311#. 1:	5 min. 20	)88#. RJ	D HES.			
			UH w/2-3/8" notch collar & 2-										
	RU swivel & strip	per. Circulate sa	nd to 3610'. Pull tbg. to 3010										
5/22/96 Bled csg. & tbg. down													
			vices. Ran after frac survey. F XX# tension. NU WH. RIH w/s								ging on every collar.		
				=, 1.					,				
18. I hereby certify that the	he foregoing is	true and corre	ct.		AC	CEDTED		<u> </u>		]			
SIGNED Mary Jo Tu	o Turrey		TITLE Prod	uction Tec	h If	CEPTED	FUR R		MgD	January 19, 2002			
(This space for Federal	or State office	use)	7			FEB	E 200	12					
APPROVED BYCONDITIONS OF AP	PROVAL, IF	ANY:	TITLE			ICD	5 200	Z DA	TE				

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.

ALEXIS C. SWOBODA
PETROLEUM ENGINEER
\*See Instruction On Reverse Side

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