

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

C/SF

5. LEASE DESIGNATION AND SERIAL NO. LC-029420-B		
6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
7. UNIT AGREEMENT NAME Skelly Unit		
8. API WELL NO. 30-015-28892		
9. WELL NO. 220		
10. FIELD AND POOL, OR WILDCAT Grayburg Jackson 7-Rivers		
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 21-T17S-R31E		
1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> 2. NAME OF OPERATOR The Wiser Oil Company 3. ADDRESS OF OPERATOR P. O. Box 2568 Hobbs, New Mexico 88241 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1330' FNL & 1400' FWL Sec. 21-T17S-R31E Unit F	12. COUNTY OR PARISH Eddy	13. STATE NM
14. PERMIT NO	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3746'	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Spudding, Cementing Surface & Production Casing</u> <input checked="" type="checkbox"/>	
(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.)

MIRU Norton Drilling Co., Rig #7. Spudded 12-1/4" surface hole @ 2:00 p.m. 10/03/96. Drilled hole to 448'. Ran 10 jts. 8-5/8", 23#, ISW-42 ST& C csg. Set at 446'. Halliburton cemented with 325 sx. Class "C" containing 1/4#/sk. Flocele + 2% CaCl. Plug down @ 10:00 p.m., 10/03/96. Circulated 83 sx. cmt. BLM was notified, no representative present. NU BOP & tested csg. to 1000# for 30 minutes, no pressure loss. WOC 12 hrs.

Drilled 7-7/8" production hole to a depth of 3800'. Ran logs and elected to run casing. Ran 91 jts. 5-1/2" 17#, J-55, LT&C csg. Set at 3800'. Halliburton cemented w/1000 gals. Superflush 102 + 1050 sx. Halliburton Lite + 8# salt/sk. + 1/4# Flocele/sk. followed by 250 sx. Premium Plus w/3#KCL/sk. + .5% Halad 344 + 1/4# Flocele/sk. Displaced w/ bbl. FW + 12 bbls. MSA + 75 bbls. FW w/Lo-Surf 300. Plug down at 8:30 p.m. 10/08/96. Circ. 121 sx. cmt. Pressure tested casing to 1500# for 30 minutes, no pressure loss. Released rig at 10:30 p.m. 10/08/96. BLM was notified, no representative present.

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

SIGNED Mary Jo Tuman TITLE Drilling Department DATE October 9, 1996

(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.

