

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division
811 SUBMIT IN REPLICATE *
Artesia, NM 88410-2834
(Other Instructions on reverse side)

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

c/SP

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME Skelly Unit	
2. NAME OF OPERATOR The Wiser Oil Company		8. API WELL NO. 30-015-28966	
3. ADDRESS OF OPERATOR P.O. Box 2568 Hobbs, New Mexico 88241		9. WELL NO. 204	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1278' FSL & 1273' FEL Sec. 14-T17S-R31E Unit P		10. FIELD AND POOL, OR WILDCAT Grayburg Jackson 7-Rivers	
		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.) 3915' GR	12. COUNTY OR PARISH Eddy	13. STATE NM

DEC 27 '96

O. C. D.
ARTESIA, OFFICE

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)

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) Perforate & Acidize

(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.)

09/27/96 Halliburton perforated San Andres Lower Massive interval f/3981', 82', 83', 84', 86', & 4006'-11' w/1 SPF (11 holes).

09/30/96 Halliburton acidized San Andres Lower Massive w/1600 gals. 15% NE-FE acid & 22 ball sealers. Formation broke @ 5230#. Balled out w/21 bbls. in formation. MTP 5230# @ 4 bpm. ATP 4150# @ 3.7 bpm. ISIP 3508#. 5 min. 2818#. 10 min. 2453#. 15 min. 2203#.

10/01/96 Halliburton perforated San Andres Three Fingers/Upper Massive interval f/3918', 19', 29', 30', 31' & 32' w/1 SPF (6 holes). Acidized w/1000 gals. 15% NE-FE acid & 12 ball sealers. Formation broke @ 3916#. Balled out w/19 bbls. in formation. MTP 4950# @ 4.2 bpm. ATP 3852# @ 3.5 bpm. ISIP 3542#. 5 min. 3063#. 10 min. 2877#. 15 min. 2726#.

10/02/96 Halliburton perforated Grayburg interval f/3433', 34', 35', 36', 72', 73', 74', 3566', 67', 68', 69', 70', 83', 84', 3616', 17', 18', 29', & 30' w/1 SPF (19 holes). Acidized Grayburg w/2900 gals. 15% NE-FE acid + 38 ball sealers. Formation broke @ 2690#. Balled out w/43 bbls. acid in formation. MTP 4200# @ 5.6 bpm. ATP 3263# @ 5.1 bpm. ISIP 1838#. 5 min. 1767#. 10 min. 1744#. 15 min. 1727#.

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

SIGNED Mary Jo Tunney TITLE Completion Department DATE October 31, 1996

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE 10 24 1996

CONDITIONS OF APPROVAL, IF ANY:

*See Instruction On Reverse Side