

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

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to and after the effective date of the Oil Conservation Division Permit - "for such proposals.")

1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. LC-029418-B	
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 2403' FSL & 78' FWL Sec. 23-T17S-R31E Unit L		8. API WELL NO. 30-015-29032	
		9. WELL NO. 240	
		10. FIELD AND POOL, OR WILDCAT Grayburg Jackson 7-Rivers	
		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.) 3857'	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"/>

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)

(Other) Perforate, Acidize & Frac

(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.)

10/31/96 Halliburton perforated San Andres Three Fingers f/3773', 74', 75', 91'-97' & 3807'-13' w/1 SPF (17 holes).

11/01/96 Halliburton acidized San Andres Three Fingers f/3773'-3813' w/2600 gals. 15% NE-FE acid & 34 ball sealers. Formation broke @ 3440#. Balled out w/40 bbls. in formation. MTP 3955# @ 4.8 bpm. ATP 2927# @ 4.7 bpm. ISIP 2503#. 5 min. 1599#. 10 min. 1221#. 15 min. 1199#.

11/04/96 Halliburton perforated Grayburg f/3346', 47', 77', 78', 79', 3418', 19', 40', 41', 42', 67', 68', 70', 75'-78', 83', 84', 87', 3509', 10', 24', 25', 37', 47', 56', & 57' w/1 SPF (28 holes).

11/06/96 Halliburton acidized Grayburg f/3346'-3557' w/4200 gals. 15% NE-FE acid & 56 ball sealers. Formation broke @ 3230#. Very little ball action. MTP 3350# @ 6.2 bpm. ATP 2410# @ 5 bpm. ISIP 2150#. 5 min. 2057#. 10 min. 2051#. 15 min. 2046#.

11/07/97 Halliburton frac. 5-1/2" csg. w/12,000 gals. gelled water & 43,000 gals. Delta Frac 20# w/122,700# 16/30 brown sand. MCP 3025# @ 56 bpm. ACP 2880# @ 55 bpm. Max. sand conc. 6.59 PPG. ISIP 2508#. 5 min. 2348#. 10 min. 2292#. 15 min. 2253#.

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

SIGNED Mary Jo Turner TITLE Completion Department DATE December 30, 1996

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
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.

