

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
N.M. Oil Cons. Division
811 S. 1st Street
Alameda, NM 88210-2834

SUBMIT IN TRIPLICATE *
(Other Instructions on
Back of Form)

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

258

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. LC-029419-A	
2. NAME OF OPERATOR The Wiser Oil Company ✓		7. UNIT AGREEMENT NAME Skelly Unit	
3. ADDRESS OF OPERATOR P.O. Box 2568 Hobbs, New Mexico 88241		8. WELL NAME AND NO. 224	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1348' FNL & 1:97' FWL Unit 1		9. API WELL NO. 30-015-29208	
10. FIELD AND POOL, OR WILDCAT Grayburg Jackson Fren 7-Rivers-QN-GB-SA		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 22-T17S-R31E	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3833'	12. COUNTY OR PARISH Eddy County	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 checked="" type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) _____	

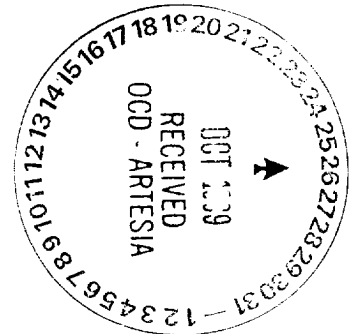
SUBSEQUENT REPORT OF:

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) _____	
(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 location, and measured and true vertical depths for all markers and zones pertinent to this work.)

Wiser request approval to Plug & Abandon the well by procedure listed below.

1. MIRU unit. Pull out of the hole with production equipment. Set cement retainer at 1500'.
2. Pump 200 sacks Class "C" neat cement.
3. POH with tubing. Shut in overnight.
4. TIH and tag cement. Circulate abandonment mud.
5. POH to 50' and circulate cement.
6. Install dry hole marker
7. Clean location. RDMO.



NOTE The casing is collapsed at 1601'. We have tried to swedge the casing and we have tried to run through the collapsed area with tubing and were not successful.

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

SIGNED Mike Jones - By mjr TITLE Superintendent DATE October 14, 1999

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE PT DATE 10/22/99

CONDITIONS OF APPROVAL, IF ANY:

*See Instruction On Reverse Side