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

UNITED STATES DEPARTMENT OF THE INTERIOR

SUBMIT IN TRIPLICATE *
(Other Instructions on reverse side)

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

0/5/

{	BUREAU	OF LAND MANAGE	MENT	reverse side)	5. LEASE D	ESIGNATION AND SER	RIAL NO.		
					NM-98				
(Do not use this	form for pro	ICES AND REPO	plug back to a	atem recording 75 Di	vision	N, ALLOTTEE OR TRIE	BE NAME		
1.				811 S 181 St 81	1	REEMENT NAME			
OIL GAS		OTHER		Artena, NM - 210-2	834 ^{Skell}				
2. NAME OF OPERATOR			8. API WELL NO.						
The Wiser Oil Cor	<u> </u>	30-015-29856							
3. ADDRESS OF OPERATO		9. WELL NO.							
P.O. Box 2568 I		400							
LOCATION OF WELL (F See also space 17 below.) At surface		10. FIELD AND POOL, OR WILDCAT Grayburg Jackson 7-Rivers							
At Surface	100' FSL &	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA							
Bottom Zone:	10' FSL &	. See	Sec. 21-T17S-R31E						
14. PERMIT NO		15. ELEVATIONS (Show	15. ELEVATIONS (Show whether DF, RT, GR, etc.)			Y OR PARISH	13. STATE		
		3761'			Eddy		NM		
16.	Check A	ppropriate Box to indi	cate Natur	e of Notice, Report, or Othe	er Data				
					narot mam n	PRODE OF			
NOT	ICE OF INT	ENTION TO:		SUI	BSEQUENT RI	EPORT OF:			
TEST WATER SHUT OFF		PULL OR ALTER CASIN	G 🔲	WATER SHUT-OFF		REPAIRING WELL			
FRACTURE TREAT		MULTIPLE COMPLETE		FRACTURE TREATMENT		ALTERING CASING			
SHOOT OR ACIDIZE		A D ANDON'S		SHOOTING OR ACIDIZING	, LJ	ABANDONMENT *			
Shoot or acidize	$\overline{\Box}$	ABANDON*		SHOOTING OR ACIDIZING	,	ADAINDONNENT			
REPAIR WELL						& rods ts of multiple completion on Well			
(Other)				Completion or Recomp					
proposed work. If well is d	irectionally d	rilled, give subsurface locatio	ns and measu	ent details, and give pertinent dates red and true vertical depths for all n	i, including estin arkers and zon	mated date of starting any es pertinent to this work.)	•		
12/29/97 POH & LD tbg. NI 01/09/98 Ran 2-7/8" tbg. Se 3629'. SN @ 3597	t TAC w/10,	000# tension. ND BOP's. R		/2" x 1-1/2" x 20' RHAC pump. I	CONTRACTOR OF THE PARTY NAMED IN	ng to Sat. # 4 Battery "B"	. Tbg. @		
					ARUORO				
					anno	1			
				JUN 1 6					
				BLM	CHIG. SO	H GARY GOURI	E		
18. I hereby certify that the forego	oing is true as								
SIGNED Many of The	LAPT	TITLE	Completion	n Department	DATE	March 10, 1998			
(This space for Federal or State	office use)				-				
APPROVED BY		TITLE			DATE				
CONDITIONS OF APPROVA	L, IF ANY:						 :		

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

UNITED STATES DEPARTMENT OF THE INTERIOR

SUBMIT IN TRIPLICATE *
(Other Instructions on reverse side)

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

•	BUNEAU	5. LEASE DESIGNATION AND SERIAL NO.						
		N.M. Oil G as Div	NM-98122 NM-98102 NM-98102					
SUNDF	ry not	ICES AND REPOR	TS ON	WELLS st St. et	'O'IMNUIA	an, allottee or trii	SE NAME	
(Do not use this	form for prop Use "APPLIC	posals to drill or to deepen or plug ATION FOR PERMIT - " for su	g back to a uch proposi	different rescholar. St. E. 210-2	Q2A			
1.				Alteria; itin	9.0NIT AGREEMENT NAME			
OIL GAS	. Ц,	Skelly Unit						
2. NAME OF OPERATOR	<u> </u>		8. API WELL NO.					
The Wiser Oil Con	mpany	30-015-29856						
3. ADDRESS OF OPERATO	OR	9. WELL N	IO.					
P.O. Box 2568 I			400	·····				
4. LOCATION OF WELL (I See also space 17 helow.)	Report location	10. FIELD AND POOL, OR WILDCAT Grayburg Jackson 7-Rivers						
At surface	100' FSL &		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA					
Bottom Zone:	10' FWL Sec. 21-T17S-R31E U		Sec. 21-T17S-R31E					
14. PERMIT NO		15. ELEVATIONS (Show who	other DE E	OT GR etc.)	12 COUN	TY OR PARISH	13. STATE	
14. PERMIT NO		3761'	alta Dr, r	(1, OK, Cic.)	Edd		NM	
16.	Check A	Appropriate Box to indicate	te Natur	e of Notice, Report, or Othe	r Data			
тои	SUE	SUBSEQUENT REPORT OF:						
TEST WATER SHUT OFF		PULL OR ALTER CASING		WATER SHUT-OFF		REPAIRING WELL		
FRACTURE TREAT		MULTIPLE COMPLETE		FRACTURE TREATMENT		ALTERING CASING		
SHOOT OR ACIDIZE		ABANDON*		SHOOTING OR ACIDIZING	, 📙	ABANDONMENT *		
REPAIR WELL	. /	Perforate, Acidize & Frac						
				` •	ts of multiple completion on Well mpletion Report and Log form.)			
(Other)	COLDITE	ED ODED ATIONS: (Clearly stat	te all pertin	completion or Recomplement details, and give pertinent dates,			,	
proposed work. If well is d	lirectionally d	rilled, give subsurface locations a	and measur	red and true vertical depths for all m	arkers and zo	nes pertinent to this work.)	; •	
63' 64' 65' 90' 9	91', 3403', 00 15% NE-FE	5', 07', 08', 13', 57', 62', 63', 64 acid + 48 ball sealers. ATP 245	4' & 66' v	nation broke @ 3868'. HES perforat w/1 SPF (22 holes). HES acidized V bpm. MTP 3150# @ 6.2 bpm. Did	acuum perfs.	3540'-3541' & Grayburg	perfs 3294'-	
12/17/97 Removed frac valve	. NU WH &	BOP. RIH w/5-1/2" Baker RBP	& pkr. on	2-7/8" tbg. Set RBP @ 3560". Set	pkr. @ 3501	T. Reset RBP @ 3494'. P	kr. @ 3248'.	
12/18/97 Reset RBP @ 3560	'. Pkr. @ 324	:						
12/19/97 POH. LD tbg., pkr.					3			
12/20/97 HES frac'd Vacuum sand. ATP 3010#	n perfs. 3540' @ 49 bpm. N	-3541' & Lower Grayburg perfs. ATP 3525#@ 51 bpm. ISIP 228	. 3294'-346 30#. 5 min	66' w/12,000 gals, gelled water, 33, L 1990#. 10 man. 1900#. 15 min. 1	881#.			
12/22/97 Removed frac valve	. NU BOP.	RIH w/notched collar on 2-7/8" t	bg.	فنعف الدود العدائي عاش معيدي لهيأ	(Chilli	SGD GARY GO	UPLE	
12/24/97 Cleaned out sand to 18. I hereby certify that the foreg			<u></u>					
signed Many to The			<u>mpletio</u>	n Department	DATE_	March 10, 1998		
(This space for Federal or State	office use)			,				
APPROVED BY		TITLE			DATE_		<u></u>	
CONDITIONS OF APPROVA	AL IF ANY							