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

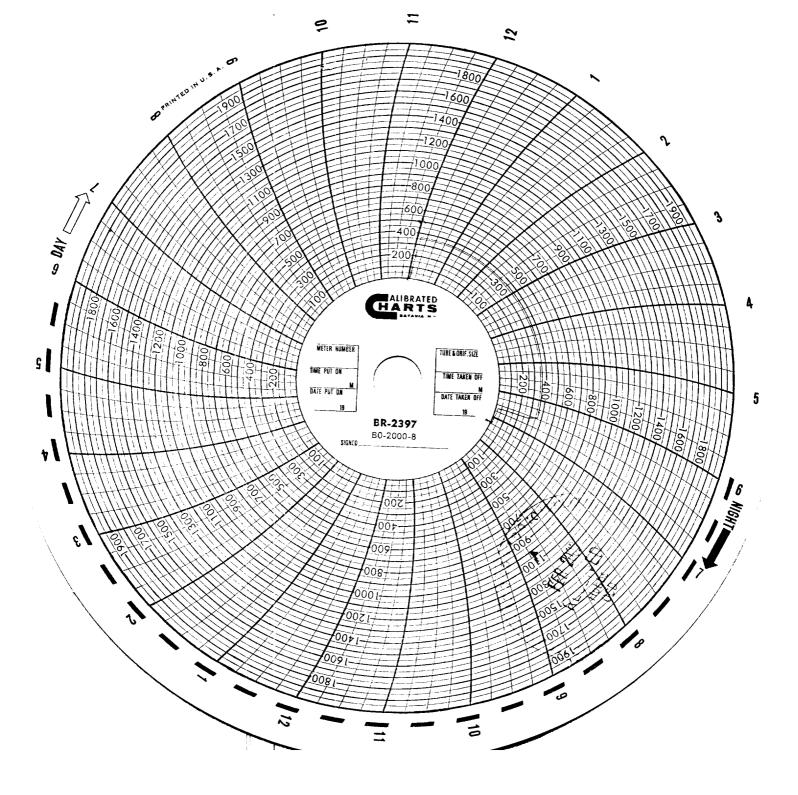
UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE *
(Other Instructions on reverse side)

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

BOKEAG OF EARD WARAGEWERT			5. LEASE DESIGNATION AND SERIAL NO. NM-098122	
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.			6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
Use "APPLICATION FOR PERMIT - "for such proposals.)			7. UNIT AGREEMENT NAME	
OIL GAS WELL GAS	Skelly Unit			
2. NAME OF OPERATOR		2002 67	8. WELL NO.	
The Wiser Oil Company	95			
3 ADDRESS OF OPERATOR	9. API Well No.			
P.O. Box 2568 Hobbs, New Mexico 88240 (505) 392-9797 ARIESIA (5)			30-015-05441	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface			10. FIELD AND POOL, OR WILDCAT Grayburg Jackson Seven Rivers QN-GB-SA	
At surface years			11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	
1980' FNL & 660' FEL Unit H			Sec. 28-T17S-R31E	
14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)			12. COUNTY OR PARISH	13. STATE
	3803' DF		Eddy County	NM
16. Check A	ppropriate Box to indicate Nature	e of Notice, Report, or Othe	r Data	
			BSEQUENT 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	CHANGE PLANS	(Other) Remedial (Note: Report results of multiple completion on Well		
(Other)		•	oletion Report and Log form.)	
17. DESCRIBE PROPOSED OR COMPLET proposed work. If well is directionally on 10/18/99 MIRU Tyler Well Service. Release pkr. NU.	frilled, give subsurface locations and measu	red and true vertical depths for all n	narkers and zones pertinent to this work.	-)
Pull to 3146'. Pkr. held. Release pkr. Circulate 75 bbls. pkr. fluid. Set pkr. Test csg. to 300# for 15 min. State did not witness. RDMO.				
Tunto St. 10 . The man terror pure				
			4.	
18. I hereby certify that the foregoing is true and correct.				
SIGNED Mary Jo Turner Mary Jo Turner	TITLE Production To	ech II	DATE December 28, 2001	
(This space for Federal or State office use)				
(This space for Teachar or State office use)			D 1000	
APPROVED BY	TITLE		DATE	.

*See Instruction On Reverse Side



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