## SUBMIT IN TRIPLICATE \* (Other Instr 📑 🥆 on

FORM APPROVED

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DEPARTMENT OF THE INTERIOR OIL CONSERV. ON DIV Expires: February 28, 1995

S.LEASE DESIGNATION AND SERIAL NO.

1. C. 020410. P. C

| OMB      | NO.  | 1002 | 1-01 | 36   |
|----------|------|------|------|------|
| Expires: | Febr | uary | 28,  | 1995 |
|          |      |      |      |      |

|   | BUREAU OF LAND WAT   |                   | AH-I          | ESIA NM 8821<br>DEEPEN     | 0-28     | LC-029419-B  |  |  |  |
|---|--|-------------------|---------------|----------------------------|----------|--|--|--|--|
| APPLIC  | 6IF INDIAN, ALLOTTEE OR TRIBE NAME                           |                   |               |                            |          |  |  |  |  |
| la TYPE OF WORK   |  |                   |               |                            |          | N/A  |  |  |  |
| DRII  | 7. UNIT AGREEMENT NAME                                       |                   |               |                            |          |  |  |  |  |
| b. TYPE OF WELL   | L X DE   | EPEN              | J             |                            |          | Skelly Unit 17540                                      |  |  |  |
|   |  |                   | SINGLE        | MULTIPLE                   |          | 8. FARM OR LEASE NAME, WELL NO.                        |  |  |  |
| OIL GAS WELL  | OTHER  |                   | ZONE          | ZONE                       |          | #263   |  |  |  |
| 2. NAME OF OPERATOR   |  | _                 |               |                            |          | 9. API WELL NO.  |  |  |  |
|   | The Wiser Oil Compa  | any 2             | 292           | 12                         |          | 30-015- 79 (84   |  |  |  |
| 3. ADDRESS AND TELEPHON   |  |                   | 0001 150      | 0.4 (E0E) 400 076          |          | 10. FIELD AND POOL OR WILDCAT                          |  |  |  |
| c/o J. O. Easley,   | Inc., P. O. Box 1796, Ros                                    | well, NM 8        | 8201-179      | 96 (303) 623-373           | 8        | Grayburg Jackson 7-Rivers-QN-GB-SA                     |  |  |  |
| 4. LOCATION OF WELL (Rep  | ort location clearly and in accordance FNL & 1262' FWL, Unit | ce with any State | requirement   | IS.*)                      |          | 11. SEC., T., R., M., OR BLK.                          |  |  |  |
|   | AND SURVEY OR AREA   |                   |               |                            |          |  |  |  |  |
| At proposed prod. Zone  | 15' FNL & 1262' FWL  | , Unit D          |               |                            |          | 27, 17S-31E, N.M.P.M.                                  |  |  |  |
| 14 DISTANCE DI MILES AND  | D DIRECTION FROM NEAREST TOWN                                | OR POST OFFICE    | :             |                            |          | 12. COUNTY FOR PARISH 13.STATE                         |  |  |  |
|   | hwest of Maljamar, NM  |                   |               |                            |          | Eddy NM  |  |  |  |
|   |  |                   |               |                            |          |  |  |  |  |
| 15. DISTANCE FROM PROPO   | SED *  |                   | 16. NO. OF    | ACRES IN LEASE             |          | NO. OF ACRES ASSIGNED<br>TO THIS WELL                  |  |  |  |
| LOCATION TO NEAREST   | NE ET 15'  |                   |               |                            |          | 40   |  |  |  |
| PROPERTY OR LEASE LI  |  |                   |               | 640.00                     |          | 10   |  |  |  |
| (Also to nearest drlg. un<br>18. DISTANCE FROM PROPO                                |  |                   | 19. PROPO     | SED DEPTH                  | 20.      | . ROTARY OR CABLE TOOLS                                |  |  |  |
| TO NEAREST WELL, DRI  | 004  |                   |               | 4800'                      |          | Rotary   |  |  |  |
| OR APPLIED FOR, ON TH   | IS LEASE, FT.  |                   |               |                            |          |  |  |  |  |
| 21. ELEVATIONS (Show wh   | ether DF, RT, GR, etc.)                                      |                   |               |                            | 12       | 22. APPROX. DATE WORK WILL START *                     |  |  |  |
| 3   | 819'   |                   |               |                            | 上        | 1-1-97   |  |  |  |
| 23.   | PROPOSE  | D CASING AN       | D CEMENT      | ING PROGRAM                |          |  |  |  |  |
| SIZE OF HOLE  | GRADE, SIZE OF CASING  | WEIGHT PE         | R FOOT        | SETTING DEPTH              |          | QUANTITY OF CEMENT                                     |  |  |  |
| 12 1/4"   | 8 5/8" 8RD ST&C J-55   | 23#               | 3# 400'       |                            |          | Circulate  |  |  |  |
| 7 7/8"  | 5 ½" J-55  | 17#               | <b>‡</b>      | 4800'                      |          | Sufficient to bring cmt 100'                           |  |  |  |
|   |  |                   |               |                            |          | above 8 5/8" casing shoe.                              |  |  |  |
|   |  | •                 |               | •                          |          | · · · · · · · · · · · · · · · · · · ·                  |  |  |  |
| Duration of Progr   | ram: Drilling - Nine (9                                      | ) davs            |               |                            | 1.       |  |  |  |  |
| Duration of Freg  | erika <b>and</b>   |                   |               |                            |          |  |  |  |  |
| C   | Ö  |                   |               |                            |          |  |  |  |  |
| See attached for o  | • · · · · · · · · · · · · · · · · · · ·                      |                   |               |                            |          |  |  |  |  |
|   |  | _                 | XHIBITS       |                            | т.       | 1.11.14 (C2). Die I expert                             |  |  |  |
| Exhibit "A": Drilling Program Exhibit "D": Land Survey Plat Exhibit "G": Rig Layout |  |                   |               |                            |          |  |  |  |  |
| Exhibit "B": H <sub>2</sub> S   | Plan Exhibi  | t "E": Vici       | nity Plat     |                            | E        | xhibit "H": BOP Layout                                 |  |  |  |
| Exhibit "C": Surfa  | ace Use Plan Exhibi  | it "F": Exis      | ting We       | ll Plat                    |          | 70   |  |  |  |
| IN ABOVE SPACE DESCRIBE P   | ROPOSED PROGRAM: If proposal is                              | to deepen, give   | data on prese | ent productive-zone and    | prop     | osed new productive zone. If proposal is to drill or   |  |  |  |
| deepen directionally, give per<br>24.   | tinent data on subsurface locations                          | ing measured an   | u u ue va uc  | ir depuis. Give blowda     | <u> </u> | program unit   |  |  |  |
| The A   | 1-0-6  |                   |               |                            | _        | 2.12.07  |  |  |  |
| SIGNED Yucha  | al J. Durch  | TITLE             | Agent for     | r The Wiser Oil (          | Com      | pany DATE 8-19-96                                      |  |  |  |
| Michael F   | R. Burch, CPL  |                   |               |                            |          | 1 -st ID-/   |  |  |  |
| (This space for Federal or S  |  |                   |               |                            |          | 10-4-96  |  |  |  |
| PERMIT NO.  |  |                   | A             | PPROVAL DATE               |          | NEW LOC 4 APT  |  |  |  |
|   |  |                   |               | tle to those rights in the | subje    | ect lease which would entitle the applicant to conduct |  |  |  |
| operations thereon  |  |                   |               | Ŭ                          | •        |  |  |  |  |
| CONDITIONS OF APPROVAL  | JOAN R. FLOREZ   |                   | ~             | <i>.</i>                   |          | SEP 2 4 1996   |  |  |  |
| APPROVED BY   | OUAN H. PLOREZ   | TITLE AC          | K112/         | Area Manage                | <u> </u> | DATE   |  |  |  |
| 121NO 122 21  |  | *See Instru       | ctions On I   | Reverse Side               |          |  |  |  |  |

<u>DISTRICT I</u> P. O. Box 1980 Hobbs, NM 88241-1980

State of New Mexico Energy, Minerals, and Natural Resources Department Form C-102 Revised 02-10-94

Instructions on back

DISTRICT II P. O. Drawer DD Artesia, NM 88211-0719

DISTRICT III 1000 Rio Brazos Rd.

## **EXHIBIT "D"**

## OIL CONSERVATION DIVISION P. O. Box 2088 P. New Mexico 87504-2088

Submit to the Appropriate District Office State Lease — 4 copies Fee Lease — 3 copies

**#7920** 

| Aztec, NM 8   | 7410   |                         | Sant                       | a re,                | MeM P    | dexic                      | 0 07             | 3 <b>04-</b> 200      | 0           | l                         | AMENDED  | REPORT   |
|---|--|-------------------------|----------------------------|----------------------|----------|----------------------------|------------------|-----------------------|-------------|---------------------------|--|----------|
| DISTRICT IV<br>P. O. Box 2<br>Santa Fe, N                             | 880  | 7-2088 <b>W</b>         | ELL LOCA                   | TION A               | ND AC    | CREA                       | GE DI            | EDICATIO              | n F         | PLAT                      |  |          |
| <sup>1</sup> API Number <sup>2</sup> Pool Code <sup>3</sup> Pool Name |  |                         |                            |                      | ;        | · ·                        |                  |                       |             |                           |  |          |
| 30-0  | 30-015- ZG 184 28509 · · · · · · · · · · · · · · · · · · · |                         |                            |                      |          |                            | Rivers QN G      | B SA                  |             |                           |  |          |
| * Property Cod  |  | 5 Property Name         |                            |                      |          |                            |                  |                       | Well Number |                           |  |          |
| 017   | 540  | SKELLY UNIT 'D'         |                            |                      |          |                            |                  |                       |             | 263                       |  |          |
| OGRID No.   | J-1U   | <sup>8</sup> Operator N | <sup>8</sup> Operator Name |                      |          |                            |                  |                       |             | 9 Elevation               | 1  |          |
| 0229  | 022922 THE WISER DIL COMPANY                               |                         |                            |                      |          |                            |                  | 3819'                 |             |                           |  |          |
|   | <del>, , , , , , , , , , , , , , , , , , , </del>          |                         |                            | ¹º SUF               | RFACE    | LOCA                       | ATION            |                       |             |                           |  |          |
| UL or lot no.   | Section  | Township                | Range                      | 2                    | Lot lda  | Feet f                     | rom the          | North/South           | line        | Feet from the             |  | County   |
| D   | 27   | 17 SOUTH                | 31 EAST, 1                 | N.M.P.M.             |          | 1                          | .5'              | NORTH                 | ,           | 1262'                     | WEST   | EDDY     |
|   |  | "BOTTO                  | OM HOLE                    | LOCATI               | ION IF   | DIF                        | FERE             | NT FROM               | SU          | JRFACE                    |  |          |
| UL or lot no.   | Section  | Township                | Range                      | •                    | Lot Ida  | Feet f                     | rom the          | North/South           | liné        | Feet from the             | East/West line   | County   |
|   |  | _                       |                            |                      |          |                            |                  |                       |             |                           |  |          |
| 12 Dedicated A  | cres 13 Jo   | oint or Infill          | 14 Consolidatio            | on Code              | 15 Order | No.                        |                  |                       |             |                           |  |          |
|   | NO AL  | LOWABLE WI              | ELL BE ASSI<br>OR A NON    | IGNED T<br>-STANDA   | O THIS   | COMP                       | LETION<br>S BEEN | UNTIL AI<br>N APPROVE | D B         | TERESTS HAY THE DIVIS     | VE BEEN<br>ION   |          |
| 16  |  |                         |                            |                      |          |                            |                  |                       | $\neg \top$ | ODED ATO                  | R CERTIFIC   | ATTION   |
| 10  | 62'  | 15'                     |                            | <br>                 |          | I I                        |                  |                       |             |                           |  |          |
|   | 02   | /3                      |                            | :<br> <br> <br> <br> |          | 1<br>1<br>1                |                  |                       |             | contained her             | lify that the int<br>ein is true and<br>I my knowledge o   | complete |
|   |  |                         |                            | i<br>                |          | !<br>!<br>!                |                  |                       |             | Spatiste                  | A. Bu  | ~        |
|   |  | i                       |                            | i<br>I               |          | 1                          |                  |                       |             | Printed Name<br>Michael F | R. Burch, CP   | L        |
|   |  |                         |                            | 1<br>T               |          | +                          |                  |                       |             | _                         | r The Wiser Or   | 1        |
|   |  | į                       |                            | į                    |          | !<br>!                     |                  |                       |             | Compan<br>Date            | <u>Y</u>   |          |
|   |  |                         |                            | i<br>!               |          | <br>                       |                  |                       |             | 8-19-96                   |  |          |
|   |  | 1                       |                            | <br> <br>            |          | i<br>!                     | •                |                       |             | SURVEYO                   | R CERTIFIC   | ATION    |
|   |  |                         |                            | <u>i</u>             |          |                            |                  |                       |             |                           | ertify that t  |          |
|   |  |                         |                            | ļ<br>!               |          |                            |                  | · .                   | _]          | location she              | own on this p  | olat was |
|   | <b>-</b>   |                         |                            |                      |          | į                          |                  |                       |             |                           | n field notes of<br>ade by me of   |          |
|   |  | ļ                       |                            | !                    |          | į                          |                  |                       |             | my superv                 | ision, and th  | hat the  |
|   |  |                         |                            | !<br>!<br>!          |          | ļ                          |                  |                       |             | same is tru<br>best of my | e and correct<br>belief.   | t to the |
|   |  | <br>                    |                            |                      |          | 1<br> <br>                 |                  |                       |             | Date of Surve             | y<br>JARY 17, 199  | 6        |
|   |  | 1                       |                            | 1                    |          | 1                          |                  |                       |             | Signature and             | State of the state |          |
|   | <del>-</del> -   |                         |                            | +                    |          | <del> </del><br> <br> <br> |                  |                       |             | Professional              | NEW MEN  | À        |
|   |  |                         |                            | <br>                 |          | <br>                       |                  |                       |             |                           | A VAIN S   | Ŋ        |

