

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other Instructions on
reverse side)

Oil Cons.

N.M. Div. Dist. 2
Budget Bureau No. 1004-0135

1301 W. Grand Avenue
Albuquerque, NM 87102

Artesia NM 88210

PLEASE INDICATE LOCATION AND SERIAL NO.
NM-098120

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"/>		7. UNIT AGREEMENT NAME Lea "D"	
2. NAME OF OPERATOR The Wiser Oil Company		8. WELL NAME AND NO. 22	
3. ADDRESS OF OPERATOR P.O. Box 2568 Hobbs, New Mexico 88241		9. API WELL NO. 30-015-29702	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1330' FNL & 2615' FWL Unit F		10. FIELD AND POOL, OR WILDCAT Grayburg Jackson 7-Rivers QN GB SA	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 26-T17S-R31E	
14. PERMIT NO	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3837'	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 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 checked="" type="checkbox"/>
(Other) <u>Acidize Grayburg</u>	
(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 an true vertical depths for all markers and zones pertinent to this work.)

12/28/01 MIRU Key Well Service. POH w/rods. Pulled pump apart @ pull rod. LD pull rod. ND WH. RU BOP. Unset TAC. POH w/2-7/8" tbg.

12/31/01 RIH w/4-3/4" tapered mill, DC's & 2-7/8" tbg. Tag @ 3702'. Mill to 3728'. Pulled to 3300'.

1/02/02 RIH w/4-3/4" tapered mill to 3880'. POH w/2-7/8" tbg. LD DC's & tools. RIH w/5-1/2" CIBP on 2-7/8" tbg. Set CIBP @ 3860'. POH to 3850' & spot 165 gals. Techni-clean 405 scale converter across perfs.

1/03/02 RU swab. Swab back scale converter. POH w/2-7/8" tbg. LD setting tool. RIH w/5-1/2" AD-1 pkr. & 2-7/8" tbg. Set pkr. @ 3350'. Test tbg. to 4000#. RU Cudd Pressure Service & acidize Grayburg 3456'-3860' w/3000 gals. 15% NE-FE acid w/2500# rock salt. Best block 1800#. Best break 1800#. ATP 2200#@ 4.0 bpm. MTP 4000# @ 4.8 bpm. ISIP 2100#. 5 min. 1870#. 10 min. 1850#. 15 min. 1840#. RD Cudd 1 hr. SI 1750#.

1/04/02 Unset pkr. POH w/2-7/8" tbg. LD pkr. RIH w/2-7/8" tbg. Tbg. @ 3850'. SN @ 3815'. TAC @ 3370'. RD BOP. NU WH. RIH w/rods & 2-1/2" x 1-1/2" x 16" RHAC pump. Left well pumping to Lea "D" Battery. RDMO.

ACCEPTED FOR RECORD

FEB 13 2002

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

SIGNED Mary Jo Turey TITLE Production Tech II DATE January 15, 2002

PETROLEUM ENGINEER

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instruction On Reverse Side

Title
state
only FEB 19 2002

I hereby certify and willfully make to any department or agency of the United States any false, fictitious or fraudulent

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BUREAU OF THE
FEDERAL RESERVE