CCA - Antesia

SUBMIT IN TRIPLICATE* Budget Bureau

Form 3160-5

(Formerly 9-331)	U	NITED STATES		(Other Instructions on	e - r	Expires August 31, 198		
(Formerly 5-331)		MENT OF THE IN		reverse side)	6 7 5 4			
RIDEALLOF LAND MANAGEMENT						5. LEASE DESIGNATION AND SERIAL NO. LC-029418(b)		
SUNDRY NOTICES AND REPORTS ON WELLS						6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
	t use this form for pro	posals to drill or to deepen o	r plug back to a	different reservoir.				
1.	Use "APPLIC	CATION FOR PERMIT - "	for such proposa		7 UNI	T AGREEMENT NAME		
OIL WELL	GAS WELL	OTHER	/S	21722324	1	ea "D"		
2. NAME OF OPER	· ·	/	/£	and the same	8. WEI	LL NAME AND NO.		
The Wiser C		<u>/</u>	2	200	10			
3. ADDRESS OF OPERATOR RECEIVED RECEIVED RECEIVED RECEIVED						9. API WELL NO.		
P.O. Box 2568 Hobbs, New Mexico 88241						30-015-29704		
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)						10. FIELD AND POOL, OR WILDCAT Grayburg Jackson 7-Rivers-QN-GB-SA		
At surface								
1303' FNL & 1306' FEL Unit A					11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA			
Omit A						Sec. 26-T17S-R31E		
14. PERMIT NO		15. ELEVATIONS (Show 3761'	Show whether DF, RT, GR, etc.)			UNTY OR PARISH	13. STATE	
- 4	<u> </u>	<u> </u>	1' . NT .	CVI ii D		Eddy	NM	
16.	Check A	Appropriate Box to inc	ncate Nature	of Notice, Report, or Otl	her Data			
NOTICE OF INTENTION TO:						NT REPORT OF:		
TEST WATER SHU	TT OFF	PULL OR ALTER CASI	NG	WATER SHUT-OFF		REPAIRING WELL		
FRACTURE TREAT	r	MULTIPLE COMPLETE	[₌]	FRACTURE TREATMENT	г 📙	ALTERING CASING	, -	
SHOOT OR ACIDIZ		ABANDON*		SHOOTING OR ACIDIZIN	√G LJ	ABANDONMENT *		
REPAIR WELL	1							
(Note: Report results of multiple completion on Well (Other) Completion or Recompletion Report and Log form.)								
17. DESCRIBE PROPO	SED OR COMPLET	ED OPERATIONS: (Clear)	y state all pertine	ent details, and give pertinent dat	es, includin	g estimated date of starting any	v	
proposed work. If w	vell is directionally dri	illed, give subsurface location	ns and measured	and true vertical depths for all n	narkers and	zones pertinent to this work.)	1	
07/22/02 MIRU Eunice	Well Service. LD rods &	pump. ND WH. RUBOP. POF	I w/2-7/8" tbg. RIH	I w/4-3/4" bit on 5-1/2" scraper & 2-7/	/8" tbg. to 345	50'. POH w/tbg. LD tools. RU Sig	mal WL. RIH w/	
5-1/2" CIBP	to 3400'. Set CIBP. Cap	w/10 sks. Class "C' cement. RD	WL. WOC.					
07/23/02 RIH w/2-7/8"	tbg. to 3300'. Pressure co	ng. to 500#. Held ok. Circulate 7	5 bbls. pkr. fluid. R	tan MIT 500# for 30 min. per OCD. P	erformed by N	Nick Jimenze w/Gandy Croporation		
and witnessed by Phil Hawkins w/.NMOCD. Held ok. POH. LD 2-7/8" tbg. RD BOP. NU WH. Well is TA'D. RDMO.								
TA Approved for all and a second for the second								
7/23/63								
			The at	1/22/03	eersans vallerijavavavajaja	504.V25		
				, ,				
18. I hereby certify that t	the foregoing is true a	nd correct.						
SIGNED Mary	Jo Tuener	TITLE	Production	Tech II	DATE_	July 29, 2002	- -	
(This space for Federal	or State office use)							
· ·	ORIG sen	io G. Lane)		10/01/00		
		THLE_	·	Patrolasm Contage	DATE_	12/19/02	<u>.</u>	
CONDITIONS OF APP	ROVAL, IF ANY:		- ~~			, ,		
		6	MOCE					

See Instruction On Reverse Side

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictious or fraudulent statements or representations as to any matter within its jurisdiction.

