

Form 9160-5
(November 1983)
(Formerly 9-331)
AUG 2002
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OCD - ARTESIA

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Oil Cons. Bureau No. 1004-0135
N.M. DIV-2
August 31, 1985

1301 W. Grand Avenue
Artesia, NM 88210

1. 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.)		5. LEASE DESIGNATION AND SERIAL NO. N.M. 98210	
1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR The Wiser Oil Company		7. UNIT AGREEMENT NAME Skelly Unit	
3. ADDRESS OF OPERATOR P.O. Box 2568 Hobbs, New Mexico 88241		8. API WELL NO. 30-015-29817	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1300' FNL & 60' FWL Unit D		9. WELL NO. 401	
14. PERMIT NO		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3761'	
16. Check Appropriate Box to indicate Nature of Notice, Report, or Other Data		12. COUNTY OR PARISH Eddy	
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 and true vertical depths for all markers and zones pertinent to this work.)		13. STATE NM	

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT * <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Perforate & acidize</u> (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

06/10/98 MIRU Pool Well Service. POH w/rods. NU BOP's. Pick up 3 jts. 2-7/8" EUE tbg. Did not tag bottom. Tally out of hole w/tbg. RIH w/RBP & pkr. Set RBP @ 3197'. Pkr. @ 3075'. RU swab. Swab Grayburg perms. 3107'-3167'.

06/11/98 FL 2900'. Move RBP to 3508'. Pkr. to 3197'. Test Lower Grayburg. Move RBP to 3580'. Pkr. to 3508'. Test Vacuum. Move RBP to 3700'. Pkr. @ 3628'. Test Lovington. Move RBP to 3197'. Pkr. to 3075'.

06/12/98 Unset pkr. POH. RU HLS & perforate Upper Gryaburg f/3107'-08',24',30',31',32',54',62',63',64' & 67' w/4 SPF. (44 holes) RU HES. RIH w/pkr on 2-7/8" tbg. Set pkr. @ 3075'. Original perms. plugged. Well broke down w/3512#. Acidize Upper Grayburg 3107'-3167' w/3000 gals. Fer-check 15% acid & 110 ball sealers. ATP 3000# @ 4.5 bpm. MTP 3500# @ 5.5 bpm. ISIP 2060#. 5 min. 1850#. 10 min. 1776#. 15 min. 1717#.

06/16/98 Unset pkr. POH. LD pkr. RIH w/retrieving head. Wash balls off RBP. Unset RBP. POH w/RBP. RIH w/2-7/8" tbg. Tbg. @ 3787'. SN @ 3750'. TAC @ 3035'. ND BOP's. NU WH. RIH w/rods & 2-1/2" x 2" x 20' RWBC pump. Left well pumping to Battery "B" Sat. # 3. RDMO.

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

SIGNED Mary Jo Tunney TITLE Production Tech II DATE July 29, 2002

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: _____