

OC.D - Hobbs

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

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. NM-09015
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 Wisner Oil Company		7. UNIT AGREEMENT NAME Maljamar Grayburg Unit
3. ADDRESS OF OPERATOR P.O. Box 2568 Hobbs, New Mexico 88241		8. WELL NAME AND NO. 89
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1275' FSL & 2525' FEL Unit O		9. API WELL NO. 30-025-33048
14. PERMIT NO		10. FIELD AND POOL, OR WILDCAT Maljamar Grayburg San Andres
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4078' GR		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 4-T17S-R32E
		12. COUNTY OR PARISH Lea County
		13. STATE NM

16. Check Appropriate Box to indicate Nature of Notice, Report, or Other Data

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 type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) _____	<input type="checkbox"/>

(Other) Temporary Abandon

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

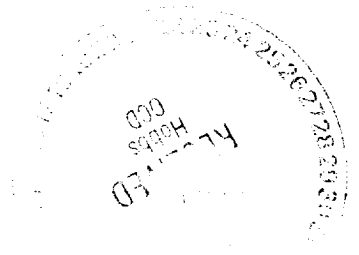
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS: (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Wiser requests approval to Temporarily Abandon the well by the procedure listed below.
Perforations: 3858'-4027' Grayburg 4051'-4105' Vacuum 4286'-4318' San Andres Three Fingers

- MIRU.
- TIH w/CIBP.
- Set CIBP @ 3800'.
- Circulate packer fluid.
- Pressure test plug and casing to 500# with chart. (30 min.)
- POH and lay down tbg.

Well is TA. *BLM*

Note: Contact *OC.D* before beginning work.



18. I hereby certify that the foregoing is true and correct.
SIGNED *S. M. Jones* TITLE Superintendent DATE October 17, 2001

(This space for Federal or State office use)

APPROVED BY **(ORIG. SGD.) JOE G. LARA** TITLE **Petroleum Engineer** DATE 11/30/2001
CONDITIONS OF APPROVAL, IF ANY:

*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, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

GW

BUREAU OF LAND MANAGEMENT
FONVILLE OFFICE

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