

N.M. Oil Cons. DIV-Dist. 2

Form 3160-5
(April 2004)

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
1801 W. Grand Avenue
Artesia, NM 88210

FORM APPROVED
OMB No. 1004-0137
Expires: March 31, 2007

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE- Other instructions on reverse side.

1. Type of Well Oil Well Gas Well Other

2. Name of Operator **The Wiser Oil Company**

3a. Address
3504 West County Road Hobbs, New Mexico 88240

3b. Phone No. (include area code)
505 392-9797

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
**1303' FNL & 1306' FEL Sec. 26-T17S-R31E
Unit A**

5. Lease Serial No.
L.C-029418B

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.
Lea "D"

8. Well Name and No.
10

9. API Well No.
30-015-29704

10. Field and Pool, or Exploratory Area
Grayburg Jackson 7-Rivers QN-GB-SA

11. County or Parish, State
Eddy County, New Mexico

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other TA Status
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

11/04/04 Wiser Oil Company respectfully request above well for extension of temporary abandon status. Well was temporary abandon July 23, 2002. Ran integrity test 500+ PSI for 30 mins. Held ok. Test performed by Nick Jimenz with Gandy Corporation. Witnessed by Gerry Guye NMOCD. Copy of chart attached. Original chart to NMOCD Artesia.

APPROVAL SUBJECT TO
GENERAL REQUIREMENTS AND
SPECIAL STIPULATIONS ATTACHED

DENIED

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Mary Jo Turner

Title **Production Analyst**

Signature

Mary Jo Turner

Date

September 10, 2005

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Title

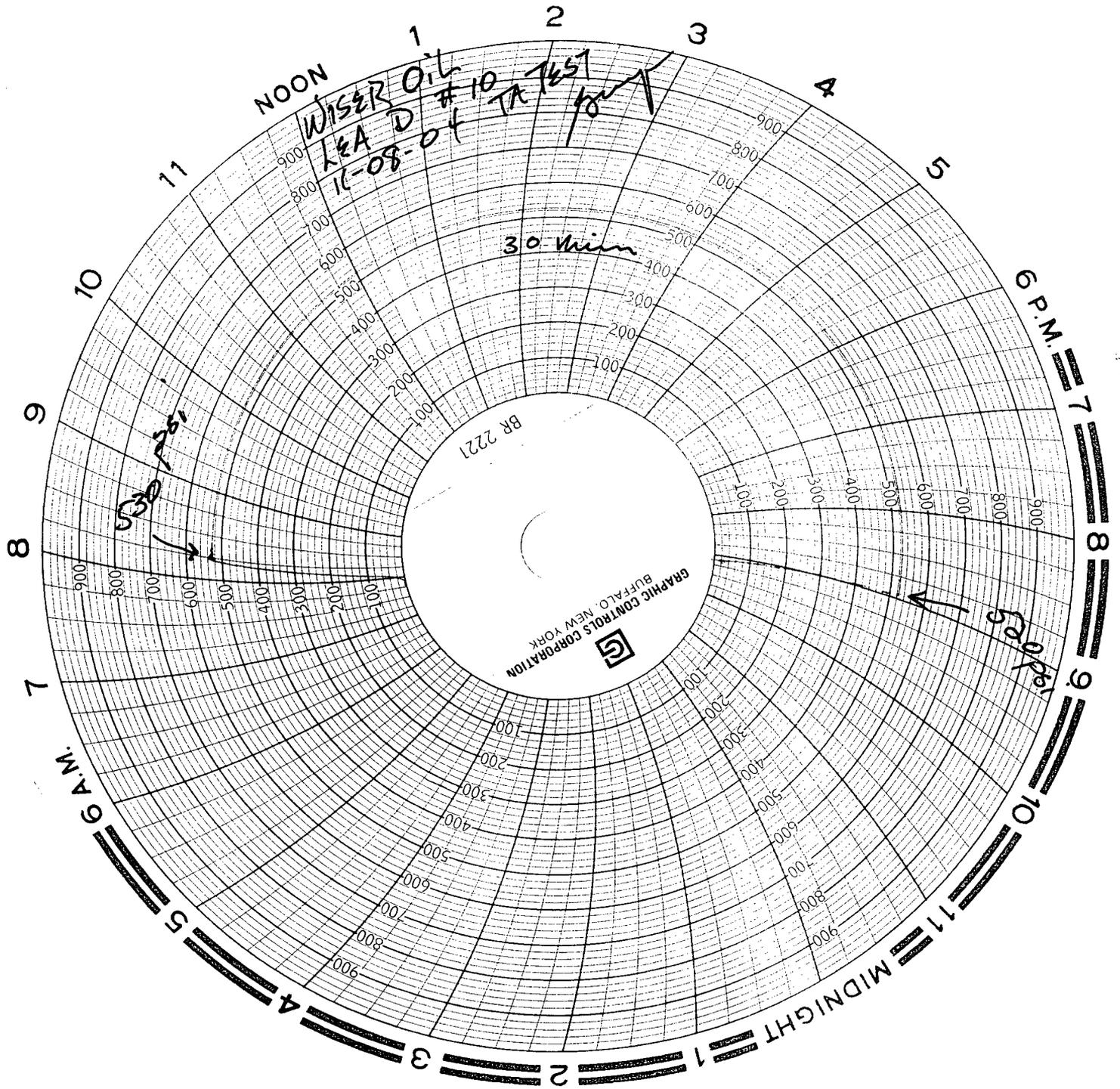
Date

Office

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212. make 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.

(Instructions on page 2)

Accepted for record - NMOCD



WATER OIL
LEAD #10
16-08-04

TR 1651

30 min

BR 2221

GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

6 A.M.

6 P.M.

MIDNIGHT

RFO

SUBMIT IN TRIPLICATE*
(Other Instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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"/>		RECEIVED		5. LEASE DESIGNATION AND SERIAL NO. LC-029418(b)
2. NAME OF OPERATOR The Wiser Oil Company		NOV 09 2005		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box 2568 Hobbs, New Mexico 88241		OCD-ARTERIA		7. UNIT AGREEMENT NAME Lea "D"
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1303' FNL & 1306' FEL Unit A				8. WELL NAME AND NO. 10
				9. API WELL NO. 30-015-29704
				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.) 3761'	12. COUNTY OR PARISH Eddy	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) Temporary Abandon	<input checked="" type="checkbox"/>
(Other)		(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.)

07/22/02 MIRU Eunice Well Service. LD rods & pump. ND WH. RUBOP. POH w/2-7/8" tbg. RIH w/4-3/4" bit on 5-1/2" scraper & 2-7/8" tbg. to 3450'. POH w/tbg. LD tools. RU Signal 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 csg. to 500#. Held ok. Circulate 75 bbls. plr. fluid. Ran MIT 500# for 30 min. per OCD. Performed by Nick Jimenze w/Gandy Croperation 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 12 Month Period
Ending 7/23/03

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

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

(This space for Federal or State office use)

APPROVED BY (ORIG. SGD.) JOE G. LARA Petroleum Engineer DATE 12/19/02

CONDITIONS OF APPROVAL, IF ANY: By ending date either return well to production or submit plugging procedure.
*See Instruction On Reverse Side