

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

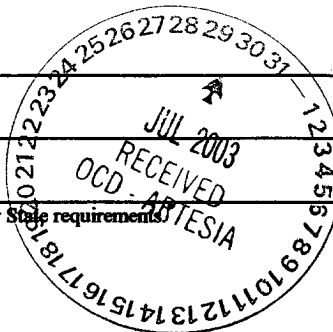
(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT - " for such proposals.)

1. OIL ☐ GAS ☐ OTHER ☐
WELL WELL WIW

2. NAME OF OPERATOR
The Wiser Oil Company

3. ADDRESS OF OPERATOR
P.O. Box 2568 Hobbs, New Mexico 88241

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface
710' FNL & 660' FEL
Unit A



5. LEASE DESIGNATION AND SERIAL NO.
NM-98120

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
Lea "D"

8. WELL NAME AND NO.

2

9. API WELL NO.
30-015-05412

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.)
3855' DF

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:

TEST WATER SHUT OFF ☐ PULL OR ALTER CASING ☐
FRACTURE TREAT ☐ MULTIPLE COMPLETE ☐
SHOOT OR ACIDIZE ☐ ABANDON* ☐
REPAIR WELL ☐ CHANGE PLANS ☐

(Other)

SUBSEQUENT REPORT OF:

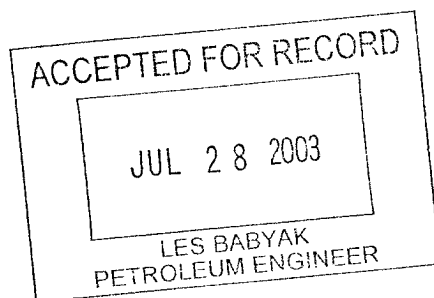
WATER SHUT-OFF ☐ REPAIRING WELL ☐
FRACTURE TREATMENT ☐ ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐ ABANDONMENT * ☐

(Other) Replace tbg. string
(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.)

6/16/03 MIRU Eunice Well Service Rig # 6. ND WH. RU BOP. POH w/2-3/8" IPC tbg. & AD-1 pkr. RIH w/redressed 2-3/8" x 5-1/2" AD-1 pkr. & 2-3/8" IPC tbg. Circulate 110 bbls. pkr. fluid. Set pkr. @ 3200'. Ran csg. integrity test 520# for 30 min. per NMOCD. Chart attached. Test performed by Nick Jimenez w/Gandy Corporation. Original chart to NMOCD. RD BOP. NU WH. Place well back on injection - 150 BWPD @ 1100#. RDMO.

Accepted for record - NMOCD



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

SIGNED Mary Jo Turner TITLE Production Tech II DATE July 1, 2003

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instruction On Reverse Side

