

30-015-29181

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**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

SUBMIT IN TRIPLICATE
(Other Instructions on
reverse side)

Oil Cons.
M. Div-Dist. 2
1001 W. Grand Avenue
Artesia, NM 88210
Budget Bureau No. 1004-0135
Expires August 31, 1985
CLSF

SUNDRY NOTICES AND REPORTS ON WELLS <small>(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.)</small>		5. LEASE DESIGNATION AND SERIAL NO. NM-98122	
		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME Skelly Unit	
2. NAME OF OPERATOR The Wiser Oil Company		8. WELL NO. 233	
3. ADDRESS OF OPERATOR P.O. Box 2568 Hobbs, New Mexico 88240 (505) 392-9797		9. API Well No. 30-015-29181	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 2620' FNL & 1343' FWL Unit F		10. FIELD AND POOL, OR WILDCAT Grayburg Jackson Seven Rivers	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 21-T17S-R31E	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3756'	12. COUNTY OR PARISH Eddy 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) <u>Perforate & acidize</u> <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.)

01/31/02 MIRU Eurice Well Service. POH w/rods & pump. ND WH. RU BOP. POH w/2-7/8" tbg. RIH w/4-3/4" bit & 5-1/2" scraper on 2-7/8" tbg. to 3350'. Slight scraping action through Grayburg 3036'-3224'. POH w/2-7/8" tbg. LD tools.

02/01/02 RU Computalog WL & perforate Seven Rivers 02057', 58', 66', 68', 70'-80', 95'-99', 2111'-14', 19', 35', 36', 40', 41', 51', 52', 57', 67', 70', 77'-79' & Grayburg 03036'-38', 50', 51', 66', 68', 3115', 23', 24', 35'-39', 43'-45', 72', 76', 96' & 3222'-24' w/4 SPF. RD WL. RIH w/5-1/2" pkr & RBP on 2-7/8" tbg. to 3250'. Set RBP. RU Cudd Pressure Services. Test plug & tbg. to 4000#. Moved up & set pkr @ 2948'. Acidized Grayburg 3036'-3224' w/2500 gals. 15% NE-FE acid w/2500# rock salt. Best block 2350#. Best break 2400#. ATP 1800# @ 4.2 bpm. MTP 4000# @ 4.5 bpm. ISIP 1200# 5 min. 600# 10 min. 100# 15 min. vac. Pump 110 gals. scale inhibitor & flushed away w/150 bbls. produced water. ATR 1500# @ 2.5 bpm. RD Cudd.

02/04/02 RU Cudd Pressure Service. Wash salt off of RBP & move it to 2202'. Test to 4000#. Set pkr @ 2000'. Acidize Seven Rivers 2057'-2179' w/2500 gals. 15% NE-FE acid w/2650# rock salt. Best block 1560#. Best break 1240#. ATP 1160# @ 4.7 bpm. MTP 2650# @ 5.2 bpm. ISIP 900# 5 min. vac. Pump 110 gals. scale inhibitor. Flush w/150 bbls. water. ATR 1000# @ 2.8 bpm. RD Cudd.

02/05/02 Wash salt off RBP. POH w/2-7/8" tbg. LD tools. RIH w/2-7/8" tbg. Tbg. @ 3280'. SN @ 3250'. RD BOP. NU WH. RIH w/rods & 1-3/4" x 16' pump. Left well pumping to Sat. # 3. RDMO.

ACCEPTED FOR RECORD

FEB 28 2002

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

SIGNED Mary Jo Turner TITLE Production Tech II DATE February 11, 2002
Mary Jo Turner ALEXIS C. SWOBODA
PETROLEUM ENGINEER

(This space for Federal or State office use)

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

*See Instruction On Reverse Side

Title Accepted for record
 stated only MAR 5 2002
 I hereby certify and willfully make to any department or agency of the United States any false, fictitious or fraudulent