Form 3160-5 (November 1983) (Formerly 9-331)

## UNITED STATES DEPARTMENT OF THE INTERIOR

SUBMIT IN TRIPLICATE \*
(Other Instructions on

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

(running 5 551)			roverse side )	Dapites August 31, 130	•
	BUKEAU	JOF LAND MANAGEMENT	•	5. LEASE DESIGNATION AND SE	RIAL NO.
				LC-029419-A	
SUNDRY NOTICES AND REPORTS ON WELLS				6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
(Do not u	se this form for pro	oposals to drill or to deepen or plug back t	o a different reservoir.		
	Use "APPLIC	CATION FOR PERMIT - " for such prop	osals.)		<del></del>
I. OIL GAS COTHER				7. UNIT AGREEMENT NAME	
WELL L	WELL L	Skelly Unit			
2. NAME OF OPERA	TOP			8. WELL NO.	
The Wiser Oil Company				42	
3. ADDRESS OF OPERATOR				9. API WELL NO.	
P.O. Box 2568 Hobbs, New Mexico 88240 (505) 392-9797				30-015-05356	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.				10. FIELD AND POOL, OR WILDO	'AT
See also space 17 below.)				Grayburg Jackson 7-Rivers-QN-GB-SA	
At surface				11. SEC., T., R., M., OR BLK. AND	
660' FNL & 1880' FEL				SURVEY OR AREA	
Unit B				Sec. 22-T17S-R31E	
					T
14. PERMIT NO.  15. ELEVATIONS (Show whether DF, RT, GR, etc.)  3875' DF				12. COUNTY OR PARISH	13. STATE
		<u> </u>		Eddy County	NM
16.	Check /	Appropriate Box to indicate Nat	ure of Notice, Report, or Oth	ier Data	
NOTICE OF INTENTION TO:				UBSEQUENT REPORT OF:	
TEST WATER SHUT	OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL	
	$\vdash$	H		<del>-</del>	<del> </del>
FRACTURE TREAT	<b>├</b> ─┨	MULTIPLE COMPLETE	FRACTURE TREATMENT	C ALTERING CASING	<b>'</b>
SHOOT OR ACIDIZE	; [_]	ABANDON*	SHOOTING OR ACIDIZIN	ABANDONMENT *	
REPAIR WELL CHANGE PLANS (Officer)					لسا
				of multiple completion on Well empletion Report and Log form.)	
(Other)		CHILD CHILD AND ACCURATE AND AC			_
nonneed work. If s	ED OK COMPLE! well is directionally	TED OPERATIONS: (Clearly state all per drilled, give subsurface locations and me	etment details, and give pertinent day assured and true vertical deoths for all	es, including estimated date of starting any I markers and zones pertinent to this work.	ý.
	-	_			
· · · · · ·		and abandon the well by the procedure listed belo	₩.		
Surface Casing: 8-5/8" set @ 616'. Production Cesing: 4-1/2" set @3764" 11.60#					
Perfs: 3188'-3606' 2283	'-2400' CIBP@ 2100	0' & 3106' w/40 coment on plug.			
				•	
1. Spot 50" plug on (	.—				
	700". Place 100" of or	nst. \$\frac{1}{1}600^1700^ inside & cutside of 4-1/2" case	. Tag cmi.		
3. 9#mmd.					
4. Perforate casing @ 670°. Circulate coment to surface. Leave a 100° plug @ 570°-670°.					
5. Tag comment.					
6. Spot 60' cornect p	•				
<ol> <li>Install dry hole an</li> <li>Clean location.</li> </ol>	EDA!				
6. Cross rocuron.					
18. I hereby certify that th	e forgeoing is true	and correct.			
271	m L			- N	•
SIGNED	II AINS	TITLE Superint	encent	DATE November 7, 200	
Mike Jone					
(This space for Federal or State office use)  APPROVED BY  TITLE					
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:  "See Instruction On Reverse Side				DATE	
CONDITIONS OF APE	KUYAL, IF ANY	· ACCEPTANT			
		A C			
	A. C.	"See Instruct	tion On Reverse Side		

Title 18 U.S.C. Section 1001, makes the 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 the my matter within its jurisdiction.