Submit 3 Copies to Appropriate District Office

CONDITIONS OF APPROVAL IF ANY:

State of New Mexico Energy, Minerals & Natural Resources Department

Form C-103 Revised 1-1-89

WELL API NO. OIL CONSERVATION DIVISION DISTRICT I 30-025-01450 1625 French Drive Hobbs, NM 88240 P. O. Box 2088 5. Indicate Type of Lease Santa Fe, NM 7504-2088 DISTRICT II FEE P. O. Drawer DD, Artesia, NM 88210 DISTRICT III 6. State Oil & Gas Lease No. 1000 Rio Brazos Rd., Aztec, NM 87410 B-2148 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR, USE "APPLICATION FOR PERMIT" Caprock Maljamar Unit (FORM C-101) FOR SUCH PROPOSALS.) 1 Type of Well: OIL GAS WIW WELL OTHER WELL 2. Name of Operator 8. Well No. The Wiser Oil Company 30 9. Pool name or Wildcat 3. Address of Operator P.O. Box 2568 Hobbs, New Mexico (505) 392-9797 Maljamar Grayburg San Andres 4. Well Location South 1980 _ Feet From The _ 660 Feet From The Line and West Unit Letter 17S 33E **NMPM** Section Township Range County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4211' GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. NOTICE OF INTENTION TO SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING **TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND ABANDONMEN **CASING TEST AND CEMENT JOB PULL OR ALTER CASING** OTHER: ____Temporarily Abendon OTHER: 12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103. 3/28/03 MIRU Eunice Well Service. ND WH. RU BOP. Unset pkr. POH w/2-3/8" tbg. LD 7" AD-1 pkr. RIH w/7" CIBP on 2-3/8" tbg, to 4112' & set CIBP. POH & LD 132 its. 2-3/8" IPC tbg. NU WH. Well is shut in. No water flow. RDMO. Will submit plug and abandon procedure. I hereby certify that the information above is true and complete to the best of my knowledge and belief. Mary Jo Twiner TITLE Production Tech II DATE <u>April 1, 2003</u> TYPE OR PRINT NAME / /Mary Jo Turner TELEPHONE NO. (505) 392-9797 OC FIELD REPRESENTATIVE II/STAFF MANAGER (This space for State Use) Hary W. APPROVED BY DATE