P. O. Drawer DD, Artesia, NM 88210

DISTRICT II

DISTRICT III

Form C-104 Revised 1-1-See Instructi at Bottom of

OIL CONSERVATION DIVISION

P. O. Box 2088

Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION

1000 Rio Brazos Rd., Aztec, NM 8741	O REQU	OEST FO	K ALLOV	VABLE A	ND AUTI	HORIZA	TION			
I.		10 IRA	NSPORT	OIL AND	NATURA	AL GAS				
Operator										
THE WISER OIL COMPANY								Well API No.		
Address 8115 PRESTON ROAD, SUITE 400, DALLAS, TEXAS 75225 Resson (a) for Eilling (charles)								30 - 025-00497	<i>DK</i>	
Reason (s) for Filling (check proper bo	ROAD, SUITE	400, DALL	as, texas	75225						
New Well					0	thes (Please	explain)			
Recompletion	Ch Ch	nange in Trac	asporter of:			,				
Change in Operator X	Oil Casinghead (G	Dry (E	FECTIVE (5/1/92			
If chance of operator give name	Casinghead	Cas	Cond	ensate						
and address of previous operator	Chevron U.s	S.A. Inc. D	O Par 1150	1400						
		orte Hrta, F.	O. Box 1150,	Midland, T	79702					
II. DESCRIPTION OF WELL	L AND LEAS									
1	Well No. Pool Name, Including Formation							Kind of Lease	Lease No	
Maljamar Grayburg Unit		53 Maliamar			Grayburg SA				I I I I I I I I I I I I I I I I I I I	
Location			1	reyourg SA	<u> </u>			Fee	<u> </u>	
Unit Letter E		1000	_							
	 '	1980	Feet From TI	ne <u>Norti</u>	h Lin	e and	610	Feet From The	West Line	
Section 10 Townshi	ip 17S		Range	32E	\$ 77					
III. DESIGNATION OF TRA	NSPODTED	ОЕОП	A NID NI 4 CO	- JAE	, N	MPM,		Lea	County	
Name of Authorized Transporter of Oil	NSI ORIER	or Conden	AND NAT			4				
_	$\square X$	or conden	isate	Add	ress (Gi	ve address t	o which a	proved copy of this f	orm is to be sent)	
Texas-New Mexico Pipelien Co.). Box 5568			·	
Name of Authorized Transporter of Casin Phillips 66 Natural Gas Co.	ighead Gas	X or I	Dry Ga	Addı	ress (Gi	e address w	which ap	Proved copy of this fe	ame is to be sough	
If well produces oil or liquids,	GPM Ga				400.	T Lendlook	, Odessa,	TX 79762	im is to be sent)	
give location of tanks.				ge. Is gas actually connected? When			When?			
	1 1		7 3		Yes		1	71		
If this production is commingled with that	from any other le	ease or pool,	give comming	ling order n	umber:			Unknown		
IV. COMPLETION DATA										
Designate Type of Completion	n - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plugbac	k Same Res'v	Diff Res'v	
Date Spudded		eady to Brod		7.17		<u> </u>				
	Date Compl. Ready to Prod.			Total Depth P.			P. B. T.	D		
Elevations (DF, RKB, RT, GR, etc.)	Name of Produ	icing Format	ion	Top Oil/Gas Pay Tub			Tubing	bing Depth		
Peforations			····				120128			
							Depth C	asing Shoe		
	Tt	UBING, CAS	SING AND C	EMENTING	PECOPO		Ц	······································		
HOLE SIZE	CASING	& TUBING	SIZE	CEMENTING RECORD DEPTH SET				SACKS CENTENER		
							SACKS CEMENT			
	 			 						
. TEST DATA AND REQUES	T FOR ALL	OWABLI	E				<u> </u>			
OIL WELL (Test must be after nate First New Oil Run To Tank	ecovery of total ve	olume of load	d oil and must	be equal to	or exceed top	allowable f	or this des	oth or be for full 24 is	nume)	
are that Mem Oil Knu 10 lank	Date of Test			Producing N	lethod	(Flow, pumy	o, gas lift,	etc.)	7413)	
ength of Test	Tubing Pressure		··	Cosico Process						
				Casing Pressure Water - Bbls.			Choke Size			
ctual Prod. During Test	Oil - Bbls.						Gas - MCF			
AS WELL	<u> </u>							_		
ctual Prod. Test - MCF/D	Township of The									
Mail 1 od. 16st - MC17D	Length of Test			Bbls. Condensate/MMCF Gravity			Gravity o	of Condensate		
esting Method (pilot, back press.)	Tubing Pressure	Casing Pressure (Shut - in) Choke Si			74					
I OPERATION OF THE	<u></u>						CHOKE 312	æ		
I. OPERATOR CERTIFICAT										
I hereby certify that the rules and regulati	ons of the Oil Cor	nservation			OIL	CONS	ERVA	TION DIVISI	ON	
Division have been complied with and that the information given above										
is true and complete to the best of my kno	wledge and belief	f.	1	Date A	Approved	·		<u> </u>		
Colley d. &	Saller			Ву	05131.44		:			
Signature	//	1	_	-, _	acolordi.ed	<u>14. 1315., 4.3</u> (Carolig		The second	· · · · ·	
Kichard L. S	Harke	u A	HIF	Title	*.,					

Telephone No. INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.

Title

3) Fill out only Sections I, II, III and VI for changes of operator, well name or number, transporter, or other such changes.

265-00FO

4) Separate Form C - 104 must be filed for each pool in multiply completed wells.

Printed Name