

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMITTING OFFICE: NM Oil & Gas Division  
1625 N. French Dr.  
Hobbs, NM 88240  
Bureau No. 1004-0135  
Expires August 31, 1985

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 WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> WIW		5. LEASE DESIGNATION AND SERIAL NO. 1004-0135	
2. NAME OF OPERATOR The Wiser Oil Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P.O. Box 2568 Hobbs, New Mexico 88241		7. UNIT AGREEMENT NAME Maljamar Grayburg	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface  660' FNL & 1980' FWL Unit C		8. WELL NAME AND NO. 51	
		9. API WELL NO. 30-025-00499	
		10. FIELD AND POOL, OR WILDCAT Maljamar Grayburg San Andres	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 10-T17S-R32E	
14. PERMIT NO	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4173' DF	12. COUNTY OR PARISH Lea County	13. STATE NM

16. Check Appropriate Box to indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
(Other) <u>Re-perf. &amp; acidize</u>	
(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.) \*

7/20/00 MIRU Key Well Service. ND WH. RU BOP. POH w/2-3/8" Epoxy coated tbg. & 5-1/2" AD-1 pkr.

7/21/00 RIH w/3-1/8" bit, 6 2-7/8" DC's & 2-3/8" tbg. Tag @ 3741'. Drill out to 4228'. Circulate hole clean. POH w/work string.

7/24/00 RU Black Warrior WL & perforate Grayburg E3903' .05', .09', .17', .18', .34', .37', .40', .43', .44', .54', .55', .56', .68', .82'-.85', 4008', .09', .19', .20', .30'-.35', .39', .40', .41', .48', .57', .58', .61', .68', .69' & 70' w/2 SPF. RD WL. RIH w/5-1/2" AD-1 pkr. on 2-3/8" Epoxy coated tbg. to 3641'.

7/25/00 RD BOP. NU WH. Circulate 80 bbls. pkr. fluid. Set pkr. @ 3641'. Pressure test back side to 500# for 15 min. Held ok. Drop standing valve. Test tbg. to 4000#. Held. RU Hughes Well Service & acidized Grayburg 3903'-4203' w/4000 gals. 15% HCL NE-FE acid w/2750# rock salt. Best block 400#. Best break 400#. ATP 3300# @ 3.1 bpm. MTP 3500# @ 3.4 bpm. Flush w/24 bbls. water. ISIP 2750#. 5 min. 2600#. 10 min. 2520#. 15 min. 2480#. SI 1 hr. 2350#. NU injection line. Placed back on injection w/250BWPD @ 1500#. RDMO.

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

SIGNED Willie Jo Turner TITLE Production Tech II DATE October 18, 2001

(This space is for use of the office used)

APPROVED BY DAVID R. GLASS TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

NOV 28 2001

\*See Instruction On Reverse Side

