

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

UNIVERSITY MICROFILMS
OFFICE FLAT PAPER
OF COPIES REQUIRED
(Other instructions on
reverse side)

N.M. Rowell District
Modified Form No.
NMXO-1160-4

6. LEASE DESIGNATION AND SERIAL NO.
LC-064150

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.)

N.M. OIL CONS. COMMISSION
P.O. BOX 1980
HOBBS, NEW MEXICO 88240

1. OIL WELL ☐ GAS WELL ☐ OTHER ☐ WIW		7. NAME 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. FARM OR LEASE NAME Maljamar Grayburg Unit	
2. NAME OF OPERATOR The Wiser Oil Company		3. AREA CODE & PHONE NO. 505/748-3352		9. WELL NO. 51	
3. ADDRESS OF OPERATOR PO Box 1412, Artesia, NM 88211-1412		10. FIELD AND POOL, OR WILDCAT Maljamar Grayburg San Andres		11. SEC., T., R., M., OR S.E. AND SURVEY OR AREA Sec. 10-T17S-R32E	
14. PERMIT NO. API #30-025-00499		15. ELEVATIONS (Show whether OF, RT, OR, etc.) 4173' DF		12. COUNTY OR PARISH Lea	
				13. STATE NM	

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	☐	PULL OR ALTER CASING	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETS	☐
SHOOT OR ACIDIZE	☐	ABANDON	☐
REPAIR WELL	☐	CHANGE PLANN	☐
(Other)	☐		

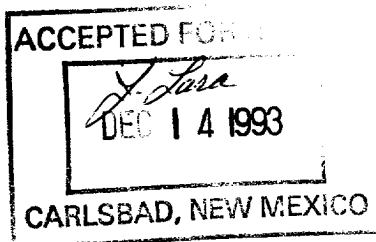
SUBSEQUENT REPORT OF:

WATER SHUT-OFF	☐	REPAIRING WELL	☐
FRACTURE TREATMENT	☐	ALTERING CASING	☐
SHOOTING OR ACIDIZING	☐	ABANDONMENT	☒
(Other)	☐	Test Casing	☐

(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.)

11/09/93 - Casing Integrity Test
Pressure to 380 psi for 17 min - No drop in pressure



RECEIVED
DEC 3 12 27 PM '93

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

SIGNED Perry L. Lopez TITLE Agent DATE 12/2/93

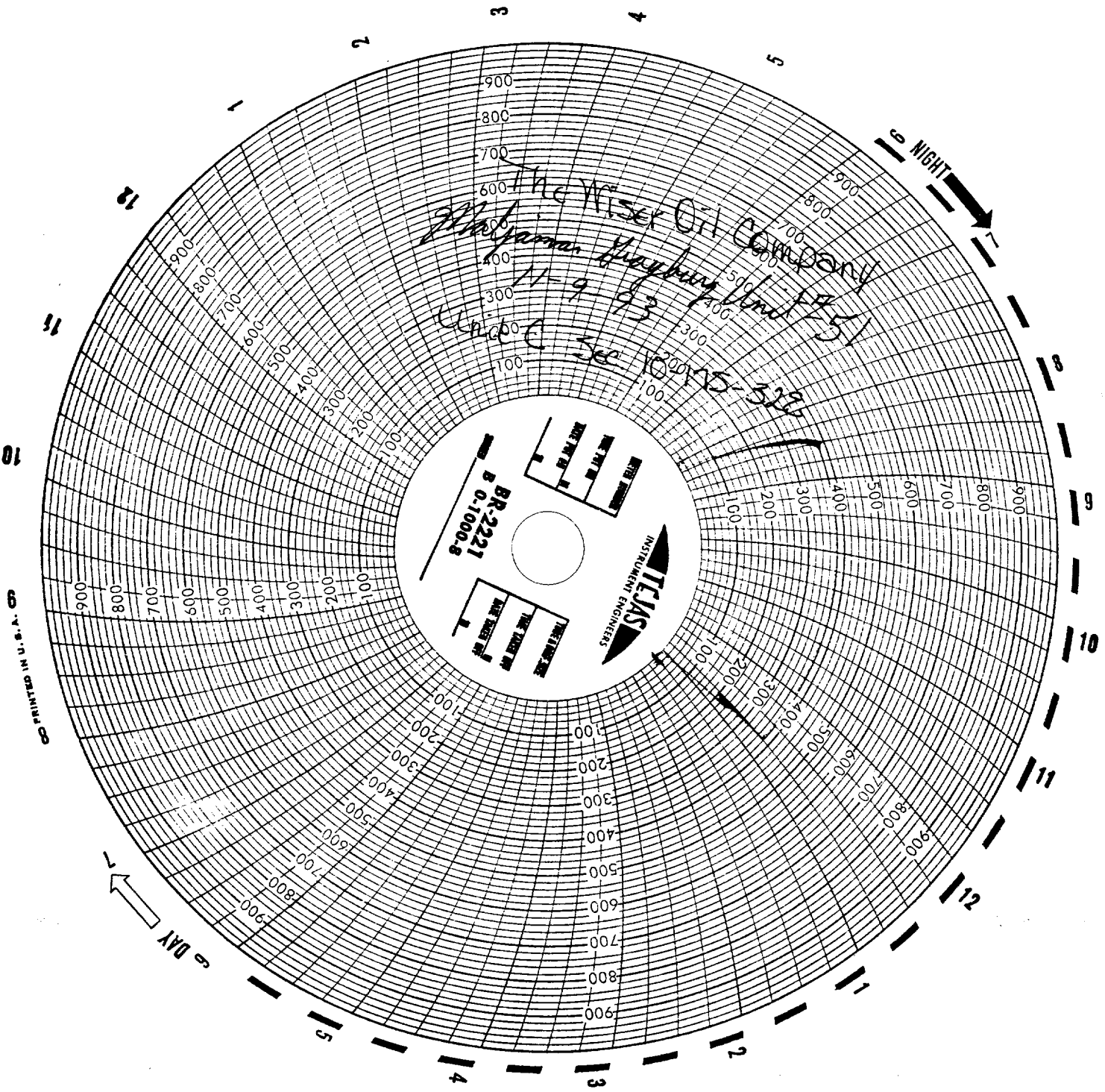
(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

Title 18 U.S.C. Section 1001, makes it a 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 or to knowingly withhold any information from any such department or agency.



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