District I PO Box 1980, Hobbs, NM 88241-1980
District II
PO Drawer DD, Artesia, NM 88211-0719
District III

1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION PO Box 2088 Santa Fe, NM 87504-2088

Form C-104 Revised February 10, 1994 Instructions on back Submit to Appropriate District Office **5** Copies

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District IV PO Box 2088, S				Santa	re, nm	18/304	4-2088				MENDED REPORT	
ru box 2068, 3						ND AU	THORI	ZAT	ION TO TH			
⁷ Operator name and Address THE WISER OIL COMPANY 207 W MCKAY									¹ OGRID Number 022092 DZZQ22 ² Remon for Filing Code			
CARLSBAD NM 88220									Change Well Name Johns B DE # 2			
	PI Number -00676		^{י Pool} Name Maljamar Grayburg San Andres						' Pool Code 43329			
	operty Code	· · · · ·	' Property Name Caprock Maljamar Unit							' Well Number 60		
I. ¹⁰ S	Surface	Location	1									
Ut or lot no. Section		Township 17S	Range 32E	Lot.Idn	Feet from 198		North/South Line South		Feet from the	East/West In West	e Coesty Lea	
¹¹ Bottom Hole Location												
UL or lot no.			Range			n the	North/South line		Feet from the	East/West En	e County	
L	24	17S	32E	<u></u>	198		South		620	West	Lea	
'' Lae Code F		ng Method Co WIW		Connection D	ale ¹³ C	-129 Permi	it Number	14	C-129 Effective I	Date 17	C-129 Expiration Date	
III. Oil and Gas Transporters												
Transpor OGRID	ter		' Transporter Name and Address			- P O	" P OD " 0/G		²² POD ULSTR Location and Description			
<u> </u>									······················			
····				<u></u>								
							I				4	
V. Produ	iced Wa	iter		<u></u>								
	POD				1	POD UL	STR Locatio	n and D	escription			
/. Well (ion Data										
¹³ Spud Date			¹⁴ Ready Date			" TD	י דט		" PBTD		¹⁴ Perforations	
* Hole Size			¹¹ Casing & Tubing Size				³² Depth Set			¹³ Sacks Cement		
	<u></u>		ļ									
/I. Well Test Data												
¹⁴ Date New Oil ³⁵		³⁶ Gas Di	elivery Date	ery Date [™] Test D		Date		th	" Thg. Pro	ssure	³⁴ Cag. Pressure	
" Choke Size		41	" Oll ^a Wi		Water	ater			" AO	F	4 Test Method	
" I hereby certif						<u></u>			L	J	<u> </u>	
with and that the information given above is true and complete to the best of my OIL CONSERVATION DIVISION											SION	
Signature: Aldred Line box Approved by:												
Printed name: PERRY D HUGHES Title:												
Tille:	- V	mes (-/			Approval Date: IIIN A 8 4001						
	۱ 	Phone: 5. 0	/ 5/225	5122		Approval Date: JUN 0 8 1994						
Date: 05/05/94 Phone: 505/885-5433 "If this is a change of operator fill in the OGRID number and name of the previous operator												

Previous Operator Signature

Printed Name

Title

Date