Submit 3 Copies

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

to Appropriate

District Office

<u>DISTRICT 1</u> P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

WELL API NO.

DISTRICT 2	2 OIL CONSERVATION DIVISION					30-025-01443			
P.O. Drawer DD, Artesia, NM 88210 P.O. Box 2088					5. Indicate Type of Lease				
		So	anta Fe, New Me	xico 87504-20	88		į	 .	
DISTRICT 3 1000 Rio Brazos Rd., Aztec, NM 87410							State 6. State Oil & Gas Lease No.		
							B-2148		
	01.01.00	NOTICES AND R	=======================================	WELL 0				. 140 	9266
(DO NOT USE TH	7. Lease Name or Unit Agreement Name								
!	Caprock Maljamar Unit								
OIL GAS WELL WEL									
2. Name of Operator							8. Well No.	Q 3/	
The Wiser Oil Company								9 %	
3. Address of Operator							9. Pool name or W	ldcat	
							Maljamar Grayburg San Andres		
207 W. McKay, Carlsbad, NM 88220 505/885-5433							ivialjalilai Glas	bulg Sali Alidies	
4. Well Location				,					
Unit Letter	E	1980	Feet From	The North	Line and	660	Feet From The	West Line	
Section	17	Township	178		Range	33E	NMPM	Lea county	
		10. Eleva		DF, RKB, RT, GR,					
NOTICE	Che OF INTEN	ck Appropriate Bo TION TO:	ox to Indicate	Nature of N			er Data ENT REPORT	OF	
PERFORM REMEDIAL WORK		PLUG AND ABANDON		REMEDIAL	WORK		ALTE	RING CASING	
TEMPORARILY ABANDON CHANGE PLANS				COMMENC	E DRILLING OPNS	i. [PLUC	AND ABANDONMENT	
PULL OR ALTER CASING				CASING TE	ST AND CEMENT	JOB			L
OTHER: Prepare to convert to						convert to \	MIW.		X
OTTICAL.									-! **
12. Describe Proposed or Comple	eted Operations	(Clearly state all pertinent deta	ails, and give pertinent	dates ,including es	timated date of star	ting any propos	ed work) SEE RULE 11	03.	
March 1995 Clean out to 4416'. Perf 4229-4375 (10 holes). Acidize perfs w/2500 gal 15% NEFE acid. Test casing & would not hold.									
	Squeeze h	ole in casing at 122' w	/50 sx cement. S	Set 5 1/2" AD-	1 tension pack	er at 4172 v	w/132 jts 2 3/8" pla	astic coated tubing.	
	Tested cas	sing to 350 psi for 15 m	ninutes, held goo	d. Casing Inte	grity Test app	roved 07/17	7/95.		

I hereby certify that the information above is ture and somplete to the best of my knowledge and belief.										
SIGNATURE	laux orter	TITLE	Agent	DATE	07/19/95					
TYPE OR PRINT NAME	NT NAME Melanie J. Parker 505/885-5433		505/885-5433	TELEPHONE NO.						
(This space for State Use) RIGINAL CHONED BY JERRY SEXTON										
APPROVED BY	DISTRICT I SUPERVISOR	TITLE		DATE	JUL 24 1995					

CONDITIONS OF APPROVAL IF ANY:

AECEIVED

JE 1995 U O D D BBS AEELAE