State of New Mexico Submit 3 Copies Form C-103 to Appropriate Energy, Minerals and Natural Resources Department Revised 1-1-89 District Office DISTRICT 1 P.O. Box 1980, Hobbs, NM 88240 WELL APINO OIL CONSERVATION DIVISION DISTRICT 2 30-025-01479 P.O. Drawer DD, Artesia, NM 88210 P.O. Box 2088 Indicate Type of Lease Santa Fe, New Mexico 87504-2088 DISTRICT 3 State 1000 Rio Brazos Rd., Aztec, NM 87410 6. State Oil & Gas Lease No. B-2148 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" (FORM C-101) FOR SUCH PROPOSALS.) Caprock Maljamar Unit 1. Type of Well OIL GAS X WIW WELL WELL OTHER 2. Name of Operator 8. Well No. The Wiser Oil Company 39 3. Address of Operator 9. Pool name or Wildcat 207 W. McKay, Carlsbad, NM 88220 Maljamar Grayburg San Andres 4. Well Location В 660 Unit Letter Feet From The North 1980 East Feet From The 19 **17S** 33E Section Township NMPM Lea County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT PULL OR ALTER CASING CASING TEST AND CEMENT JOB OTHER OTHER: Prepare to convert to WIW. 12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103. February 1995 Clean out to 4350'. Perf 4081-4221 (14 holes). Acidize perfs w/2500 gal 15% NEFE acid. Set 5 1/2" AD-1 tension packer at 3994' w/128 jts 2 3/8" plastic coated tubing. Tested casing to 350 psi for 15 minutes, held good. Casing Integrity Test approved 07/17/95.

| I hereby certify that the informa | tion above is ture and complete to the best o | f my knowledge an | rd belief | | |
|-----------------------------------|---|---------------------|-----------|---------------|--------------|
| SIGNATURE | Claring total | TITLE | Agent | DATE | 07/19/95 |
| TYPE OR PRINT NAME | Melanie J. Parker | Parker 505/885-5433 | | TELEPHONE NO. | |
| (This space for State Use) | IGINAL SIGNED BY JERRY | SEXTON | | | |
| APPROVED BY | DISTRICT I SUPERVISO | TITLE | | DATE | JUL 2 4 1995 |
| CONDITIONS OF APPROVAL | IF ANY: | | | | JUL & 4 1993 |