

DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

DISTRICT 2
P.O. Drawer DD, Artesia, NM 88210

DISTRICT 3
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.	30-025-01481
5. Indicate Type of Lease	State
6. State Oil & Gas Lease No.	B-2148
7. Lease Name or Unit Agreement Name	Caprock Maljamar Unit
8. Well No.	66
9. Pool name or Wildcat	Maljamar Grayburg San Andres

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.)

1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> WIW	2. Name of Operator The Wiser Oil Company	3. Address of Operator 207 W. McKay, Carlsbad, NM 88220 505/885-5433	4. Well Location Unit Letter J : 1980 Feet From The South Line and 1980 Feet From The East Line Section 19 Township 17S Range 33E NMPM Lea County 10. Elevation (Show whether DF, RKB, RT, GR, etc.)
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Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: Converted to Water Injection Well ☒

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.

The above well has been converted to a WIW.

WFX-661

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Melanie J. Parker TITLE Agent DATE 07/18/95
TYPE OR PRINT NAME Melanie J. Parker 505/885-5433 TELEPHONE NO.

(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT SUPERVISOR TITLE DATE JUL 24 1995

CONDITIONS OF APPROVAL IF ANY:

24P