

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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.
30-025-01484
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.
51
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 ☐ GAS ☐ WELL ☐ OTHER ☒ 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 F : 1980 Feet From The North Line and 2048 Feet From The West Line
Section 19 Township 17S Range 33E 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 ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
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.

March 1995 Cleaned out to 4300'. Perf 3958-3967 (10 holes). Acidize perms w/2500 gal 15% NEFE acid. Set 5 1/2" AD-1 tension packer at 3859' w/122 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 information above is true and complete to the best of my knowledge and belief.

SIGNATURE Melanie J. Parker TITLE Agent DATE 07/19/95
TYPE OR PRINT NAME Melanie J. Parker 505/885-5433 TELEPHONE NO.

(This space for State Use) ORIGINAL SIG. OF JERRY SEXTON
APPROVED BY DISTRICT SUPERVISOR TITLE

DATE JUL 24 1995

CONDITIONS OF APPROVAL IF ANY:

RECEIVED

JUL 20 1995

JOHN HOBBS
OFFICE