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 I
P.O. Box 1980, Hobbs, NM 88240

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

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

OIL CONSERVATION DIVISION

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

WELL API NO. 30-025-01487

5. Indicate Type of Lease STATE ☑ FEE ☐

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.)

7. Lease Name or Unit Agreement Name: CAPROCK MALJAMAR Unit

1. Type of Well: OIL WELL ☑ GAS WELL ☐ OTHER

2. Name of Operator: THE WISER OIL COMPANY

8. Well No. #50

3. Address of Operator: P.O. Box 2568, HOBBS, NEW MEXICO

9. Pool name or Wildcat: MALJAMAR (GRAYBURG/SAN ANDRES)

4. Well Location

Unit Letter E : 1980 Feet From The NORTH Line and 694 Feet From The WEST Line

Section 19 Township 17S Range 33E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

11. 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:	☐		

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.

1. Drill out Cmt Plug @ 550-750 CIBP @ 1320 & CIBP @ 1910 9-16-97
2. Set CIBP @ 3900 9-23-97
3. Spot 25 sks Class "C" CMT 3900'-3650' 9-23-97
4. Set CICR @ 1550' 9-24-97
5. Squeezed 300 sks Class "C" CMT Below CR 9-25-97
6. Spot 50 Sx Class "C" CNT 1500-1050'± 9-25-97
7. Spot 14BBL Plug Mud
8. Spot 40 Sx Class "C" CNT 390 - Surface 9-25-97
9. Install Dry Hole Marker - Clean Loc.

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

SIGNATURE Cal Mayo TITLE Consultant DATE 9-29-97

TYPE OR PRINT NAME TELEPHONE NO.

(This space for State Use)

APPROVED BY TITLE DATE JAN 27 2000

CONDITIONS OF APPROVAL IF ANY:

JCJ

CP