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Appropriate District Office  
DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

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

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator <b>THE WISER OIL COMPANY</b>	Well API No. <b>3002501492</b> ✓
Address <b>8115 PRESTON ROAD, SUITE 400, DALLAS, TX 75225</b>	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Recompletion <input type="checkbox"/>	CHANGE IN OPERATOR EFFECTIVE 8/1/92
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator <b>QUALITY PRODUCTION CORP., PO BOX 250, HOBBS NM 88241</b>	

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>MAL GRA UNIT B</b>	Well No. <b>1</b>	Pool Name, Including Formation <b>SAN MALJAMAR GRAYBURG ANDRES</b>	Kind of Lease <b>State, DEDUCTIBLE</b>	Lease No. <b>B-2148</b>
Location Unit Letter <b>I</b> , <b>660</b> Feet From The <b>East</b> Line and <b>1980</b> Feet From The <b>South</b> Line Section <b>20</b> Township <b>17S</b> Range <b>33E</b> , <b>NMPM</b> , Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <b>TEXAS NEW MEXICO PIPELINE CO.</b>	Address (Give address to which approved copy of this form is to be sent) <b>PO BOX 2528, HOBBS NM 88240</b>	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <b>PHILLIPS 66 NAT'L GAS CO. - GPM Gas Corporation</b>	Address (Give address to which approved copy of this form is to be sent) <b>BARTLESVILLE, OK 74004</b>	
If well produces oil or liquids, give location of tanks.	Unit <b>J</b> Sec. <b>20</b> Twp. <b>17S</b> Rge. <b>33E</b>	Is gas actually connected? <b>Yes</b> When? <b>2/15/55</b>
If this production is commingled with that from any other lease or pool, give commingling order number:		

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

*Perry L. Hughes*  
Signature **Perry L. Hughes** Agent  
Printed Name **12/31/92** Title **505/748-3352**  
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved **JAN - 5 1993**

By **ORIGINAL SIGNED BY JERRY SEXTON**  
DISTRICT I SUPERVISOR

Title