

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 1990, 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.

30-025-01496

5. Indicate Type of Lease

State

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.

69

3. Address of Operator

207 W. McKay, Carlsbad, NM 88220 505/885-5433

9. Pool name or Wildcat

Maljamar Grayburg San Andres

4. Well Location

Unit Letter K : 1650 Feet From The South Line and 2310 Feet From The West Line
Section 20 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:

PERFORM REMEDIAL WORK



PLUG AND ABANDON



TEMPORARILY ABANDON



CHANGE PLANS



PULL OR ALTER CASING



OTHER:

Convert to WIW



SUBSEQUENT REPORT OF

REMEDIAL WORK



ALTERING CASING



COMMENCE DRILLING OPNS.



PLUG AND ABANDONMENT



CASING TEST AND CEMENT JOB



OTHER:



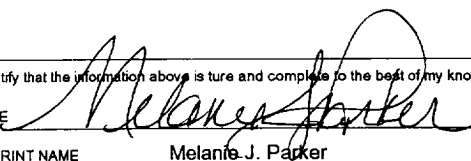
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

We request permission to convert the above well to a WIW. This is expansion of the Caprock Maljamar Waterflood Project

and was approved under Division Order WFX-670.

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

SIGNATURE



TITLE

Agent

DATE

07/20/95

TYPE OR PRINT NAME

Melanye J. Parker

505/885-5433

TELEPHONE NO.

(This space for State Use)

APPROVED BY

TITLE

DATE

JUL 24 1995

CONDITIONS OF APPROVAL IF ANY: