

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

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

WELL API NO.

30-025-01499

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
Property No. 14578

1. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER

2. Name of Operator

THE WISER OIL COMPANY

8. Well No.

42

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 C : 660 Feet From The North Line and 1980 Feet From The West Line

Section 20

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:

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 plan to convert this well to water injection.

This well was approved under the Caprock Maljamar Unit Waterflood
Project, Division Order No. R-10094.

(Formerly Western State No. 2)

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

SIGNATURE

Perry L. Hughes

TITLE

Agent

DATE

06/30/94

TYPE OR PRINT NAME

Perry L. Hughes

505-885-5433

TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

TITLE

DATE

07/01/94

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

1950

PRICE