Submit to Appropriate District Office State Lease — 6 copies
Fee Lease — 5 copies

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-101 Revised 1-1-89

<u>DISTRICT I</u> P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

API NO. (assigned by OCD on New Wells) P.O. Box 2088 5. Indicate Type of Lease

30*-*02*5-31*981

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

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aztec	NM 87410	6. State Oil & Cas Lease N B-2148	ło.			
APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK						
la. Type of Work:			7. Lease Name or Unit Agreement Name			
DRILL b. Type of Well: OIL GAS WELL X WELL	. X RE-ENTER	DEEPEN SINGLE ZONE	PLUG BACK MULTIPLE ZONE	State 18-B		
2 Name of Operator The Wiser Oil Company  8. Well No. 10						
3. Address of Operator	PO Box 1412, 2	Artesia, NM 8	8211-1412	9. Pool name or Wildcat Maljamar Graybo	ırg San Andres	
4. Well Location Unit Letter H	: 1365 Feet Fr	om The North	Line and 126	Feet From The	East Line	
Section 1	8 Towns	hip 17S Ran	33E	MMPM Lea	County	
10. Proposed Depth 4900'				<del>'ormation</del> yburg San Andres	12 Rozary or C.T. Rotary	
13. Elevations (Show whether DF, RT, GR, etc.) 4215 GR		4. Kind & Status Plug. Bood Statewide	15. Drilling Contractor	TF	Date Work will start 15, 1993	
PROPOSED CASING AND CEMENT PROGRAM						
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP	
12-1/4"	8-5/8"	24#	1100'	650	Circulate	
7-7/8"	5-1/2"	17#	4900'	600	2300' (base	
1		1			of salt)	

It is proposed to drill the above captioned well to a total depth of 4900' with rotary tools. If commercial production is indicated, the well will be perforated and stimulated as necessary.

Blow out Prevention: 10" Series 900 Type "E" Shaffer Hydraulic BOP.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPE ZONE, GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.  I hereby certify that the information above is the and complete to the best of my knowledge and SIGNATURE  TYPE OR PRINT NAME  TYPE OR PRINT NAME  TO THE TYPE OR PRINT NAME	HGENT DATE 5/18/93
(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR	"
CONDITIONS OF APPROVAL, IF ANY:	Fermit Expires 6 Months From Approval (1994)  Date: Unless Brilling Underway.

n 12-32/00