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

## OIL CONSERVATION DIVISION PO Box 2088

WELL API NO.

P.O. BOX 1980, 110008, 1411 00240	P.O. Box 2088		30-025-32042		
Santa Fe, New Mexico 87504-2088 O. Drawer DD, Artesia, NM 88210			5. Indicate Type of Lease STATE FEE  FEE		
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			6. State Oil & Gas Lease No. B-2148		
OUNDRY NOTICES	AND DEDORTS ON WELL	ıs	///////////////////////////////////////		
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		
1. Type of Well: OIL OZ	OTHER		Western State		
OIL WELL OAS WELL	OTHER		8. Well No.		
2. Name of Operator			18		
The Wiser Oil Company			9. Pool name or Wildcat		
3. Address of Operator PO Box 1412, A	rtesia NM 88210-14	.12	Maljamar Grayburg San Andres		
4. Well Location  Unit Letter K: 1355 Fe	set From The South	Line and _1351_	Feet From The West Line		
Section 17 To	ownship 17S Rai	nge 33E I	NMPM Lea County		
Section 17 Township 17S Range 33E NMPM Lea County  10. Elevation (Show whether DF, RKB, RT, GR, etc.)  4208' GR					
Cheels Appropriate Box to Indicate Nature of Notice, Report, or Other Data					
NOTICE OF INTENTION TO:			SEQUENT REPORT OF:		
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING		
TEMPORARILY ABANDON	CHANGE PLANS X	COMMENCE DRILLING	OPNS. PLUG AND ABANDONMENT		
PULL OR ALTER CASING		CASING TEST AND CE	MENT JOB L		
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.					
Request permission to drill 5500' instead of 5200'as originally approved.					

I hereby certify that the information		Perry Hughes, Agent	DATE 7/27/93
TYPE OR PRINT NAME			TELEPHONE NO.
(This space for State Use)	Orig. Signed by Paul Kautz Geologist	TITLE	DAAUG 03 1993

APPROVED BY ---

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OFFICE