

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

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

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

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

WELL API NO. 30-025-32550

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.)

1. Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. Name of Operator
The Wiser Oil Company

7. Lease Name or Unit Agreement Name
Caprock Maljamar Unit

8. Well No. 193

3. Address of Operator
207 W. McKay, Carlsbad, NM 88220

9. Pool name or Wildcat
Maljamar Grayburg San Andres

4. Well Location
Unit Letter E : 2516 Feet From The North Line and 62 Feet From The West Line
Section 20 Township 17S Range 33E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
4210' GR

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: ☐

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.

08/17/94 - Ran CBL TD-1750 (TOC). Perf'd 4443, 44, 48, 49, 50, 55, 56, 4529, 30, 31, 32, 33, 4622, 24, 25, 29, 30, 40, 41, 4700, 02, 04, 06, 08 (24 holes).

08/18/94 - Acidized perfs 4700-4708' w/ 1000 gal 15% NEFE acid. Acidized perfs 4622-4641' w/ 1000 gal 15% NEFE acid. Acidized perfs 4529-4533' w/ 1000 gal 15% NEFE acid.

08/19/94 - Acidized perfs 4443-4456' w/ 1500 gal 15% NEFE acid.

08/20/94 - 08/29/94 - Swab testing zones.

08/30/94 - Acidized perfs 4443-4456' w/ 4000 gal 20% VCA.

08/30/94 - 09/05/94 - Swab testing zones.

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

SIGNATURE Melanie J. Parker TITLE Agent DATE 9/6/94

TYPE OR PRINT NAME Melanie J. Parker 505/885-5433 TELEPHONE NO.

(This space for State Use) APPROVED BY JERRY SEXTON
SUPERVISOR

APPROVED BY DATE SEP 12 1994

CONDITIONS OF APPROVAL, IF ANY: