Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

<u>DISTRICT_1</u> P.O. Box 1980, Hobbs, NM 88240

							WELL API NO.			
P.O. Drawer DD, Artesia, NM 88210 P.O. Drawer DD, Artesia, NM 88210 P.O. Box 2088 Santa Fe, New Mexico 87504-2088							30-025-32920 5. Indicate Type of Lease			
DISTRICT 3								State		
1000 Rio Brazos Rd., Aziec, NM 87410							6. State Oil & Gas L			
							B-2	2148		
S	UNDRY NOTICES	AND REPOR	TS ON WE	LLS						
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A						7. Lease Name or Unit Agreement Name				
DIFF	ERENT RESERVOIR.	USE "APPLICA	TION FOR P	ERMIT"						
	(FORM C-101) FOR SUCH PROPOSALS.)						Caprock Maljamar Unit			
1. Type of Welf: Oil GAS							- Capitock Maijamai Onit			
OIL GAS WELL	OTHER									
2. Name of Operator							8. Well No.			
The Wiser Oil Company							129			
3. Address of Operator						#··	9. Pool name or Wile	deat		
207 W. McKay, Carlsbad, NM 88220 505/885-5433						Maljamar Grayburg San Andres				
4. Well Location								V		
Unit Letter	<u>H</u> :	1340	Feet From The _	North Line	and	59	Feet From The	East	Line	
Section	18	Township	178	Rang	e	33E	NMPM	Lea	County	
		10. Elevation (Sho	w whether DF, RK 4206'							
	Check Appropr	igte Box to Inc			Donost					
NOTICE OF	INTENTION TO:	idle box to m		ne or Nonce,			NT REPORT (∩E		
PERFORM REMEDIAL WORK	PLUG AND ABAI	IDON		REMEDIAL WORK			٦			
TEMPORARILY ABANDON	CHANGE PLANS				10 onuo	<u> </u>	i	RING CASING		
	CHANGEPLANS			COMMENCE DRILLII		<u> </u>	j PŁUG. ⊐	AND ABANDONI	MENT	
PULL OR ALTER CASING			'	CASING TEST AND	CEMENT JO	в	_			
OTHER: Extend Permit to Dril		X	0	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 an extension of the approved Application for Permit to Drill on the above described well.

	<i>,</i>	\frown	EXF	pires A	sril 14, 1996
I hereby certify that the information	sh borres ture and complete to the best of	my knowledge and belief.	Agent	DATE	09/21/95
TYPE OR PRINT NAME	Melanie J. Parker		885-5433	TELEPHONE	
(This space for State Use) APPROVED BY	Orig. Signed by Paul Kautz	TITLE		DATE	SEP 27 1995
CONDITIONS OF APPROVAL II	Geologist				

26.2020181There is 19.20.2020181