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 1

P.O. Box 1980, Hobbs, NM 88240

DISTRICT 2

P.O. Drawer DD, Artesia, NM 88210

DISTRICT 3 1000 Rio Brazos Rd., Aztec, NM 87410

## OIL CONSERVATION DIVISION

Santa Fe, New Mexico 87504-2088

30-02532922

5. Indicate Type of Lease

WELL APINO.

State

1000 Rio Brazos Rd., Aztec, NI	M 87410							6 State Cil & Gas I	.ease No. 2148	
	SUNDRY	NOTICES	AND REP	ORTS ON WELLS	3			<u> </u>	- 1-40	
(DO NOT USE	THIS FORM FO	R PROPOS	ALS TO DRIL	L OR TO DEEPEN O	R PLUG BACK	то а		7. Lease Name or t	Jnit Agreement	Name
				LICATION FOR PERM PROPOSALS.)	1IT"			Caproc	k Maljam:	ar Unit
i I 😼 :	AS VELL	OTHER						-		a. 51.11
2. Name of Operator						<del></del>		8. Well No.		
The Wiser	Oil Company								139	
Address of Operator					·			9. Pool name or Wi	dcat	
207 W. McKay, Carlsbad, NM 88220 505/885-5433							Maljamar Grayburg San Andres			
4. Well Location								. <u> </u>		
Unit Lette	- <u>G</u>	:	2603	Feet From The NOT	th Line	and 13	358	Feet From The	East	Line
Section	18		Township	178	Range	33	E	NMPM	Lea	County
			10. Elevation	(Show whether DF, RKB, R' 4215 GR	T, GR, etc.)					

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF IN	TENTION TO:		SUBSEQUENT REPORT OF			
ERFORM REMEDIAL WORK	PLUG AND ABANDON		REMEDIAL WORK		ALTERING CASING	
EMPORARILY ABANDON	CHANGE PLANS	X	COMMENCE DRILLING OPNS.		PLUG AND ABANDONMENT	==-
ULL OR ALTER CASING			CASING TEST AND CEMENT JOB			****
THER:	****		OTHER:	· <del></del>		7
						<u> </u>

We request to change the setting of the surface pipe on the above referenced well. The approved setting depth is 1350 with the cement circulating to surface. We would like to change the setting depth to 460' and circulate the cement to surface. We will bring the cement used on the 5 1/2" casing to 100' above the 8 5/8" casing shoe.

APPROVED BY	DISTRICT 1 S	UPERVISOR TITLE		DATE	DEC 18 1995	
This space for State Lise)	NICINIAL CICNED	BY JERRY SEXTURE				
TYPE OR PRINT NAME	SILE ON IF PORTE			TELEPHONE NO.		
SIGNATURE	Melanier	Harlestitle	Agent	DATE	12/13/95	
hereby certify that the infor	major above is ture and complet	te to the best of my knowledge and be	elief.			
	1					

<sup>12.</sup> 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.