

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

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

WELL APT NO.	30-025-32923
5. Indicate Type of Lease	State
6. State Oil & Gas Lease No.	B-2148
7. Lease Name or Unit Agreement Name	Caprock Maljamar Unit
8. Well No.	140
9. Pool name or Wildcat	Maljamar Grayburg San Andres

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	
2. Name of Operator The Wiser Oil Company	
3. Address of Operator 207 W. McKay, Carlsbad, NM 88220 505/885-5433	
4. Well Location Unit Letter <u>H</u> : <u>2618</u> Feet From The <u>North</u> Line and <u>88</u> Feet From The <u>East</u> Line Section <u>18</u> Township <u>17S</u> Range <u>33E</u> NMPM <u>Lea</u> County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4212' GR	

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: Extend Permit to Drill <input checked="" type="checkbox"/>	OTHER: <input type="checkbox"/>

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.

Expires April 14, 1996

I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE <u>Melanie J. Parker</u>	TITLE <u>Agent</u>	DATE <u>09/21/95</u>	
TYPE OR PRINT NAME <u>Melanie J. Parker</u>	<u>505/885-5433</u>	TELEPHONE NO.	
APPROVED BY <u>Paul Kautz</u> (This space for State Use) <u>Geologist</u>		DATE <u>SEP 27 1995</u>	
CONDITIONS OF APPROVAL IF ANY:			

