

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. 30-025-32929

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

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

8. Well No. 162

9. Pool name or Wildcat
Maljamar Grayburg San Andres

4. Well Location
Unit Letter O : 56 Feet From The South Line and 2595 Feet From The East Line
18 Section 17S Township 33E Range NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
4148 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.

05/18/95 - Perf 4610, 11, 12, 40, 42, 45, 46, 47, 49, 57, 59, 60, 63, & 64 (14 holes).

05/19/95 - Acidize perfs 4610-4664 w/3000 gal 15% NEFE acid.

05/23/95 - Perf 4353, 67, 70, 73, 81, 88, 89, 90, 4403, 04, 07, 08, 13, 42 & 43 (15 holes). Acidize perfs 4353-4443 w/3000 gal 15% NEFE acid.

05/24/95 - Perf 4076, 77, 4106, 11, 12, 13, 36, 53, 64, 65, 66, 67, 94, 95, 98, 4203, 04, 05, 16, 35, 36, 44, 49, 52, 53, 57, 68, 73, 77, 78, & 79 (31 holes). Acidized perfs 4076-4279 w/3000 gal 15% NEFE acid.

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 06/16/95
TYPE OR PRINT NAME Melanie J. Parker 505/885-5433 TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

JUN 20 1995

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: