

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. OIL CONS. COMMISSION
BOX 1980
SUNBELT • NEW MEXICO 88240
SUBMIT IN TRIPlicate Budget Bureau No. 1004-0135
(Other Instructions on reverse side) Expires August 31, 1985

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 - " for such proposals.)		5. LEASE DESIGNATION AND SERIAL NO. LC-064150	
1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR The Wiser Oil Company		7. UNIT AGREEMENT NAME Maljamar Grayburg Unit	
3. ADDRESS OF OPERATOR 8115 Preston Road, Suite 400, Dallas, TX 75225		8. FARM OR LEASE NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1534' FNL & 1372' FWL, Unit F		9. WELL NO. 106	
		10. FIELD AND POOL, OR WILDCAT Maljamar Grayburg San Andres	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 10, T17S-R32E, NMPM	
14. PERMIT NO. API # 30-025-33039	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4148' GR	12. COUNTY OR PARISH Lea	13. STATE NM

16. Check Appropriate Box to indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Spud Well & Set Casing</u>	
(Other)		(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS: (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

1/10/96 Spud 12¼" hole @ 4:15 PM. TD 12¼" hole @ 9:39 PM @ 460'. Ran 10 jts 24# J-55 8 5/8" csg & set @ 460' w/300 sx Class "C" w/¼ # Flocele. Circ 112 sx to pit.

1/12/96 WOC 18 hrs. Pressure test csg to 1000# for 20 min., no pressure loss.

1/16/96 TD 7 7/8" hole @ 4:30 pm. Ran 102 jts 17# J-55 5½" csg & set @ 4425' w/1250 sx Howdco Lite w/¼# Flocele; 300 sx Premium Plus w/.5% Halad-9 w/3# KCI per sk & 250 sx Premium Plus w/.5% Halad-344 w/3# KCI per sk. Plug down @ 5:30 AM 1/17/96. Circ 185 sx to pit. Release rig @ 7:00 AM 1/17/96.

1/18/96 WOC. Pressure test csg to 1500# for 30 min., no pressure loss.

18. I hereby certify that the foregoing is true and correct.

SIGNED Michael R. Burch TITLE Agent for The Wiser Oil Company DATE 4-24-96

Michael R. Burch, CPL

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE 4/24/96

CONDITIONS OF APPROVAL, IF ANY:

*See Instruction On Reverse Side

