Submit 3 copies to Appropriate District Office

DISTRICT\_I

P.O. Box 1980, Hobbs, NM 88240

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

OIL CONSERVATION DIVISION 310 Old Santa Fe Trail, Room 206 Santa Fe, New Mexico 87503

WELL API NO.

30-025-33270

DISTRICT II P.O. Box Drawer DD, Artesia, NM 88210	5. Indicate Type of Lease  STATE X FEE
DISTRICT_III 1000 Rio Brazos Rd., Aztec, NM 87410	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.)	7. Lease Name or Unit Agreement Name
1. Type of Well:  Oil X Gas  Well Well OTHER	Caprock Maljamar Unit
2. Name of Operator	8. Well No.
The Wiser Oil Company	9. Pool name or Wildcat
3. Address of Operator 8115 Preston Road, Suite 400, Dallas, TX 75225	Maljamar Grayburg San Andres
4. Well Location	
Unit Letter O: 1234 Feet From The South Line and 1404 Feet From The	he East Line
Section 19 Township 17S 33E NMPM  10. Elevation (Show whether DF, RKB, GR, etc.)  4087' GR	County Lea
Check Appropriate Box to Indicate Nature of Notice, Report, or Other I NOTICE OF INTENTION TO: SUBSEQUENT REP	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS.	x PLUG AND ABANDONMENT
PULL OR ALTER CASING CASING TEST AND CEMENT JOB	<u>x</u>
OTHER: OTHER:	
12. Descibe Proposed or Completed Operation (Clearly state all pertinent details, and give pertinent dates, including estimated SEE RULE 1103.	date of starting any proposed work)
03/16/96 Spud 12½" hole @ 1:00 p.m. Ran 11 jts 8-5/8" 23# ST&C csg. Cmt w/30 CaCL2 & ¼ # Flocele/sx. Pug down @ 7:15 p.m. Circ 80 sx to pit.	0 sx Class "C" w/2%
03/17/96 WOC. Pressure test csg to 1000# for 30 min, no press loss.	
03/21/96 TD @ 4750' @ 9:30 p.m.	
03/22/96 Ran 111 jts 5 ½" 17# J-55 LT&C csg. Cmt w/1200 sx Hal Lite. Tail in w/Circ 15 sx.	250 sx Class "C".
04/03/96 WOC. Pressure test csg to 1500# for 30 min, no press loss.	
I hereby certify that the information above is true an complete to the best of my knowledge and belief	
SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  TITLE Production Administrator	date 07/01/96
TYPE OR PRINT NAME Betty Epie	TELEPHONE NO. (214)265-0080
(THIS SPACE FOR STATE USE)	JUL <b>10</b> 1996
APPROVED BY TITLE	
CONDITIONS OF APPROVAL, IF ANY:	