

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
N.M. Oil Conservation Division
P.O. Box 1980
Hobbs, NM 88241

Budget Bureau No. 1004-0135
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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM-0315712	
2. NAME OF OPERATOR The Wiser Oil Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P.O. Box 2568 Hobbs, New Mexico 88241		7. UNIT AGREEMENT NAME Maljamar Grayburg Unit	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 377' FSL & 1667' FWL Sec. 4-T17S-R32E Unit N		8. API WELL NO. 30-025-33298 ✓	
		9. WELL NO. 100 ✓	
		10. FIELD AND POOL, OR WILDCAT Maljamar Grayburg San Andres	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 4-T17S-R32E	
14. PERMIT NO	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4109.7'	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:

TEST WATER SHUT OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT * <input type="checkbox"/>
(Other) <u>Perforate, Acidize & Frac</u> <input checked="" type="checkbox"/>	

(Note: Report results of multiple completion on Well

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.)

10/15/96 Halliburton perforated San Andres Three Fingers f/4234', 35', 36', 40', 61', 62', 63', 64', 65', & 66' w/1 SPF (10 holes). Did not break down formation.

10/16/96 Halliburton re-perforated San Andres Three Fingers f/4234', 35', 36', 40', 61', 62', 63', 64', 65' & 66' w/2 SPF. Formation would not break down. Dumped 15 gals. 15% NE-FE acid f/4230'-60'. Pumped 21 bbls. 15% NE-FE acid & formation charged up. Could not put acid to perfs. RIH w/5-1/2" CIBP & set @ 4100'. Perforated Grayburg f/3825', 26', 27', 28', 54', 55', 56', 57', 72', 73', 79', 80', 81', 3945', 46', 53', 54', 62', 63', 68' & 69' w/1 SPF (21 holes). HES acidized w/3200 gals. 15% NE-FE acid + 42 ball sealers. Formation broke @ 3612#. ACP 3890# @ 4.5 bpm. MCP 5105# @ 6.1 bpm. Balled out w/67 bbls. in formation & 30 balls on formation. ISIP 2843#. 5 min. 1992#. 10 min. 1736#. 15 min. 1628#.

10/17/96 Halliburton frac'd Grayburg f/3825'-3969' w/5000 gals. gelled water followed by 40,000 gals. Delta Frac 25# & 100,000# 16/30 sand. Flushed w/4205 gals. gelled water. MTP 4833# @ 44.27 bpm. ATP 4430# @ 39 bpm. Max. sand conc. 6 ppg. ISIP 3711#. 5 min. 3453#. 10 min. 3306#. 15 min. 3202#.

10/30/96 Spotted 2 bbls. 15% NE-FE HCL acid. Acidized Three Fingers w/1500 gals. 15% NE-FE acid & 60 ball sealers. Formation broke @ 4834#. Good ball action w/25 bbls. acid in formation & 50 balls on formation. Did not ball out. MTP 5400# @ 4.5 bpm. ATP 5061# @ 3.3 bpm. ISIP 3008# 5 min. 2387#. 10 min. 2174#. 15 min. 2045#.

11/01/96 Ran 2-7/8" tbg. to 3909'. SN @ 3876#. TAC @ 3337'. Ran 2-1/2" x 1-1/2" x 16' RHTC pump.

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

SIGNED Mary Jo Turner TITLE Completion Department DATE November 19, 1996

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instruction On Reverse Side

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.