

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPlicate
(Other Instructions on Reverse Side)
Bureau No. 1004-0135
Expires August 31, 1985

N.M. OIL CONS. COMMISSION
P.O. BOX 1980
MORGAN, NEW MEXICO 88240

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.)

LC-059152-B

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR The Wiser Oil Company		7. UNIT AGREEMENT NAME Caprock Maljamar Unit	
3. ADDRESS OF OPERATOR c/o J. O. Easley, Inc., P. O. Box 1796, Roswell, NM 88202-1796		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 1484' FNL & 2475' FWL, Unit F		9. WELL NO. 172	
14. PERMIT NO. API #30-025-33423		10. FIELD AND POOL, OR WILDCAT Maljamar Grayburg San Andres	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4070'		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 24, T17S-R32E, N.M.P.M	
		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) <input type="checkbox"/>	

(Other) Correct Depth & Cement Program

(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.)

The proposed total depth for this well was mistakenly cited as 4800' on the Application for Permit to Drill approved 5-1-96.
The correct depth should be 5500', and the Proposed Casing and Cement Program is corrected as follows:

Hole Size	Casing Size	Casing weight/foot	Setting Depth	Cement
12 1/4"	8 5/8" J-55	24#	350'	650 sx Circ.
7 7/8"	5 1/2" J-55	17#	5500'	1200 sx Sufficient to bring cmt 100' above 8 5/8" casing shoe

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

SIGNED Michael R. Burch TITLE Agent for The Wiser Oil Company DATE 7-2-96

Michael R. Burch, CPL

(This space for Federal or State office use)

APPROVED BY Patricia J. Burch TITLE Patricia J. Burch DATE 7/22/96

CONDITIONS OF APPROVAL, IF ANY:

*See Instruction On Reverse Side

