Form 3160-5
(June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

FORM APPROVED
Budget Bureau No. 1004–0135
Expires: March 31, 1993

5. Lease Designation and Serial No.
NM 801

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE

7. If Unit or CA, Agreement Designation

1. Type of Well
☐ Oil Well ☐ Gas Well ☒ Other WIW

2. Name of Operator
The Wiser Oil Company

3. Address and Telephone No.
207 W. McKay, Carlsbad, NM 88220 (505)885-5433

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1980' FNL & 660' FEL, Unit H
Section 33 17S 33E

8. Well Name and No.
Phillips Federal #3

9. API Well No.
30-025-01387

10. Field and Pool, or Exploratory Area
Maljamar Grayburg San Andre

11. County or Parish, State
Lea, NM

12. **CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION	
☐ Notice of Intent	☐ Abandonment	☐ Change of Plans
	☐ Recompletion	☐ New Construction
☒ Subsequent Report	☐ Plugging Back	☐ Non-Routine Fracturing
	☐ Casing Repair	☐ Water Shut-Off
☐ Final Abandonment Notice	☐ Altering Casing	☐ Conversion to Injection
	☒ Other Cleanout & Acidize	☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)*

12/09/93 - Cleaned well out to 4582'.

12/10/93 - Acidized perfs 4405-4503 w/2500 gal 15% NEFE acid.

12/13/93 - Ran 5 1/2" 15.5# Guiberson AD-1 plastic coated tension packer & 138 jts 2 3/8" plastic coated tbg. Set pkr @ 4316' & tested annulus to 350 psi for 15 min. Held good. Well ready for injection.

APR 1 1

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

Signed _____ Title ____Agent____ Date 3/25/94

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any:

*See Instruction on Reverse Side