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State of New Mexico

Form C-103

to Appropriate	Energy, Minerals & Natural Resources Department	t Revised 1-1-89
District Office	OIL CONSERVATION DIVISION	
<u>DISTRICT I</u> P. O. Box 1980, Hobbs, NM 88240	P. O. Box 2088	30-025-34193
	Santa Fe, NM 87504-2088	5. Indicate Type of Lease
DISTRICT II P. O. Drawer DD, Artesia, NM 8821		STATE FEE
F. O. Diawei DD, Altesia, 1997 6627	•	6. State Oil & Gas Lease No.
DISTRICT III	410	B-2229
1000 Rio Brazos Rd., Aztec, NM 874	NOTICES AND REPORTS ON WELLS	
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A		7. Lease Name or Unit Agreement Name
DIFFERENT I	RESERVOIR, USE "APPLICATION FOR PERMIT" ORM C-101) FOR SUCH PROPOSALS.)	
1 Type of Well:		Caprock Maljamar Unit (14578)
OIL GA	XX7 4 T 1 - 41 XX7-11	
17 15 15 15 15 15 15 15 15 15 15 15 15 15	ELL OTHER Water Injection Well	8. Weli No.
2. Name of Operator The Wice	r Oil Company (22922)	283
3. Address of Operator	1 On Company (22722)	9. Pool name or Wildcat
P. O. Box	c 2568, Hobbs, NM 88241	Maljamar Grayburg San Andres (43329)
4. Well Location		
Unit Letter O	1033 Feet From The South Line and 197	75 Feet From The East Line
20	4-6	NMPM Lea County
Section 28	Township 17S Range 33E N	AND IVI
	Check Appropriate Box to Indicate Nature of Notice	e, Report, or Other Data
	F INTENTION TO SUI	BSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS COMMENCE DRILLI	ING OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING	CASING TEST AND CE	MENT JOB
0 11 11/14	er Injection Well	
OTHER: Convert to Water	ted Operations (Clearly state all pertinent details, and give pertinent	dates, including estimated date of starting any
proposed work) SEE RULE 1103	3.	
- · ·		r st mt
The Wiser Oil Compar	ny wishes to convert this well to a Water Injection W	/ell. This is an expansion of the Caprock
	flood Project, which was approved under New Mexi	ico Oil Conservation Division Order R-
10094.		
9		
11/FS	C-742	
W/	above is true and complete to the best of my knowledge and belief.	
i hereby certify that the information		
SIGNATURE ///icha	Deurch les TITLE Agent for TI	he Wiser Oil Company DATE 9-24-98
7-7	Michael R. Burch, CPL	
TYPE OR PRINT NAME	<u></u>	TELEPHONE NO. (505) 746-1070
(This space for State Use)	CMSTA CONTINE	fig. ()
•	Control of the contro	DATE
APPROVED BY		

APPROVED BY _____

CONDITIONS OF APPROVAL, IF ANY: