Submit 3 copies to Appropriate District Office

State of New Mexico Energy, N als and Natural Resources Department

Form C-103 Revised 1-1-89

OIL CONSERVATION DIVISION

		OEKVAII							
DISTRICT [310 (310 Old Santa Fe Trail, Room 206				WELL API NO.			
P.O. Box 1980, Hobbs, NM 88240	Santa Fe, New Mexico 87503								
)25-06952		
DISTRICT_II						5. Indicate Type of I		I	<u>.</u>
P.O. Box Drawer DD, Artesia, NM 88210						31	TATE F	EE X	<u> </u>
DISTRICT III						6. State Oil & Gas L	ease No.		
1000 Rio Brazos Rd., Azte . NM 87410									
						Manager Secretor Secr	16242	118 Mar 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	s a
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"						7. Lease Name or Unit Agreement Name			
	(FORM C-101) FOR SUCH PRO	POSALS	S.)					
I. Type of Well:	(DOWNES A			
Oil X Gas									1
Well Well		OTHER							
2. Name of Operator						8. Well No.			
The Wiser Oil Company						3			
3. Address of Operator						9. Pool name or Wildcat			
	eston Road, Suite 40	0, Dallas, TX 75225	j			<u> </u>			
4. Well Location	1000	0 4		1000		***			
Unit Letter K:	1980 Feet F	rom The South	Line and	1980	Feet From The	Wes	t		Line
Section 32	Township	21S Range	37	NMPM			Cour	ntv	Lea
Section 32		ation (Show whetther D					00.	it.y	- Cu
	TO. Elev	NA NA		, •,		3 3 3k			
11,		Check Appropriate l	Box to Inc	licate Nature of Notice, F	Report, or Other I	Oata			
NOTICE	OF INTENTION	TO:			SUBSEQU	ENT REPORT O	F:		
					-				
PERFORM REMEDIAL WORK	PLUG A	ND ABANDON		REMEDIAL WORK		ALTERING	CASING		
TEMPORARILY ABANDON	X CHANG	E PLANS		COMMENCE DRILLI	ING OPNS.	PLUG AND	ABANDONM	1ENT	
PULL OR ALTER CASING				CASING TEST AND	CEMENT JOB				
OTHER:				OTHER:					
12. Descibe Proposed or Completed Oper	ation (Clearly state all po	ertinent details, and give	pertinent da	tes, including estimated date of	of starting any propos	sed work)			
SEE RULE 1103.									
Plan to set plug within 100	of top perfs. Fill v	ith packer fluid & p	ressure tes	st to 500# for 30 minutes	. This work will	be completed before	12/15/97.		
rian to set plug within 100	or top peris. Tim v	in packer have exp.							
		. h6	and helief						
I hereby certify that the information above	is true an complete to th	e pest of my knowledge	and belief.						
SIGNATURE &	Long		TITLE	Production Administrat	or		DATE 5	/13/97	
SIGINATURE	· 9~								
TYPE OR PRINT NAME Susan I	łopper				TELEPHONE NO.	(214)265-00)80		
		imad he				-10			
(THIS SPACE FOR STATE USE)	Orig.	ligned by Kautz ologist					4		***
	Pau	l Nauva					NAM S	2 T '	1661
APPROVED BY	Ge	010X t2A	TITLE				DATE		