Submit 3 Copies To Appropriate District	State of New Mexico		Form C-103
Office District I	Energy, Minerals and Natural Resources		Revised March 25, 1999
1625 N. French Dr., Hobbs, NM 88240 District II			WELL API NO. 30-025-06955
811 South First, Artesia, NM 88210	M 88210 OIL CONSERVATION DIVISION		5. Indicate Type of Lease
District III 1000 Rio Brazos Rd., Aztec, NM 87410	2040 South Pacheco		STATE FEE X 🔀
vistrict IV	trict IV Santa Fe, NW 8/303		6. State Oil & Gas Lease No.
2040 South Pacheco, Santa Fe, NM 87505			
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement Name:
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			Downes D
1. Type of Well:			
Oil Well 🔀 Gas Well 🗆	Other		
2. Name of Operator The Wisser Oil Comments			8. Well No. 2
The Wiser Oil Company 3. Address of Operator			9. Pool name or Wildcat DHC #2124
8115 Preston Road, Suite 400, Dallas, TX 75225-6311		Blinebry Oil & Gas	
4. Well Location			
	000 C (C (I	0 4 1 1 1	
Unit LetterL_:19	980feet from the	South line and	810feet from the Westline
Section 32	Township 2		NMPM Lea County
10). Elevation (Show who	ether DR, RKB, RT, GR, etc	:.)
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: SUBSEQU			SEQUENT REPORT OF:
PERFORM REMEDIAL WORK P	LUG AND ABANDON [REMEDIAL WOR	K
TEMPORARILY ABANDON C	HANGE PLANS [LLING OPNS. PLUG AND ABANDONMENT
	ULTIPLE { OMPLETION	CASING TEST AN	
	OWN ELTION		
OTHER:		OTHER: Plug Bac	
12. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.			
3/16/00 RU pulling unit. TOH w/pump and rods. TOH w/tbg.			
3/17/00 Set CIBP over Tubb @ 6100'. TIH w/tbg. TIH w/rods and pump. (Well now producing from Blinebry perfs only at 5762'-5806'.)			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
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SIGNATURE Jangle 2) octory 1	FITLE Production Admins	strator DATE_11/27/00
Type or print name Temple Dockery Telephone No. 214 360-3526			
(This space for State use)			
APPPROVED BY	Т	TITLE OF	DECATE 5 200
Conditions of approval, if any:		E (E)	BFC IA