NO. OF COPIES RECEIVED		-	Form C-103
DISTRIBUTION			Supersedes Old C-102 and C-103
SANTAFE	NEW MEXICO OIL CONS	ERVATION COMMISSION	Effective 1-1-65
FILE			
U.S.G.S.			5a. Indicate Type of Lease
LAND OFFICE			State Fee. X
OPERATOR			5. State Oll & Gas Lease No.
SUNI (DO NOT USE THIS FORM FOR USE "APPLIC	DRY NOTICES AND REPORTS ON PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BU CATION FOR PERMIT -" (FORM C-101) FOR SUCI	WELLS ACK TO A DIFFERENT RESERVOIR. H PROPOSALS.)	
1			7. Unit Agreement Name
WELL CAS	OTHER-		
2. Name of Operator	8. Farm or Lease Name		
The Wiser Oil	Company		Mary L. McQuatters
3. Address of Operator	<u></u>		9. Well No.
P.O. Box 2467	2		
4. Location of Well	Hobbs, New Mexico		10. Field and Pool, or Wildcat
UNIT LETTER II	1980 FEET FROM THE North	LINE AND 660 FEET FROM	Eunice-Mon.(G-SA)
East use se	CTION 11 TOWNSHIP 215	BANGE 36E NMPM.	
the the first set			
	12. County		
	GR 3553		
	k Appropriate Box To Indicate N	-	
NOTICE OF	REPORT OF:		
[]			
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	
TEMPORARILY ABANDON	[]	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB	[]
OTHER MEMORANDUM	9-13-74 TA wells 🕅	OTHER	
		l	

17. 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.

The above mentioned well was TA prior to April 1959. The reason for the TA was no commercial oil production. This is a working interest partner ship well and we are at the present time getting approval from the other interest owners to plug and abandon this well and salvage what $5\frac{1}{2}$ " casing that can be pulled. We expect to have the necessary permission from the partners in the near future. At this time we will file another C-103 requesting permission to plug and abandon the well in accordance with the rules of the New Mexico Oil Conservation Commission. We expect to begin the plugging of this well sometime before December 1, 1974.

Expires 10/1/75

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED	Amplitary	TITLE District Supt	DATE 10-26-74
APPROVED BY	OVAL, IF ANY:	TITLE	DATS