Submit to Appropriate

## State of New Mexico

Fort	u C	-101
Rev	ised	1-1-89

District Office State Lease — 6 copies Foe Lease — 5 copies	Energy	Energy, Minerals and Natural Resources Department			Revised 1-1-89				
DISTRICT I P.O. Box 1980, Hobbs, Ni	M 88240	OIL CONSERVATION DIVISION P.O. Box 2088				API NO. (assigned by OCD on New Wells)			
DISTRICT II P.O. Drawer DD, Artesia,		Santa Fe, New Mexico	87504-2088		5. Indicate	Type of Lease	гате 🗌	FEE XX	
DISTRICT III 1000 Rio Brazos Rd., Azte	c, NM 87410				6. State Oil	& Gas Lease		TEE CO.	
APPLICAT	TION FOR PERMIT	TO DRILL, DEEPEN, O	OR PLUG BACK						
la. Type of Work:	. =	,			7. Lease Na	me or Unit A	greement Name		
DRIL	L RE-ENTE	R DEEPEN	PLUG BACK	]	Downe	s "B"			
b. Type of Well: OIL GAS WELL WELL X	OTHER	SINGLE ZONE	MULTIFLE ZONE			,			
2. Name of Operator THE WISER OIL COMPANY					8. Well No.				
3. Address of Operator 700 Petroleum Building, Wichita Falls, TX 76301					9. Pool name or Wildcat Tubbs				
4. Well Location Unit Letter D	: 560 Feet	From The North	Line and	810	Feet	From The	West	Line	
Section	5 Town	nship 22-S Ran	nge 37-E	NM	IPM	Lea	//////////////////////////////////////	County	
///////////////////////////////////////			i	ormation 12. Rotary or C.T. ubbs WOR			T.T.		
13. Elevations (Show whether 3465 RT	Show whether DF, RT, GR, etc.)  14. Kind & Status Plug. Bond  15. Drilling Contractor  Blanket Good Standing DA&S		iractor	16. Approx. Date Work will start 8-13-90			start		
17.		ROPOSED CASING AN	•	OGRA	м М				
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEP	TH S	SACKS OF CEMENT		EST. TOP		
12-1/4	8-5/8	24#	1118		700		Surface	of GR	
7-7/8	5-1/2	17#	6704		800		2700		
Plan to set Cl Perf Tubbs zor Will be shot 1	IBP @ 6530' w/3 ne from 6150 to L hole per foot	roducing 15 MCFPD 5' cement on top. 6242 w/net pay of w/ 11/16" expenda	f 41' able tbg gun.						

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE, DIVE BLOWOUT PREVENTER PROGRAM, IF ANY. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

TITLE Drlg & Compl. Supervisor DATE 8-8-90

TYPE OR PRINT NAME

Herbert L. Holder

(This space for State Use)

ATTROVED BY

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AUG 13 1990

CONDITIONS OF APPROVAL, IF ANY:
Approved for recompletion work only--well cannot be produced from Tubb Gas until NSL is approved.