

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB No. 1004-0137  
Expires: March 31, 2007

**SUNDRY NOTICES AND REPORTS ON WELLS**  
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.*

**SUBMIT IN TRIPLICATE** - Other Instructions on reverse side.

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <b>Injection</b>		5. Lease Serial No. <b>LC-058481</b>
2. Name of Operator <b>EnerVest Operating, LLC</b>		6. If Indian, Allottee, or Tribe Name
3a. Address <b>1001 Fannin St, Suite 800 Houston, TX 77002-6707</b>	3b. Phone No. (include area code) <b>713-659-3500</b>	7. If Unit or CA. Agreement Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) <b>1980' FSL &amp; 2380' FWL (UL K) Sec 11 T18S R29E</b>		8. Well Name and No. <b>WLH G4S Unit #33</b>
		9. API Well No. <b>30-015-37019</b>
		10. Field and Pool, or Exploratory Area <b>Loco Hills; QU-GB-SA</b>
		11. County or Parish, State <b>Eddy Co., NM</b>

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/ Resume)	<input type="checkbox"/> Water Shut-off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and abandon	<input type="checkbox"/> Temporarily Abandon	<b>MIT &amp; Resume Injection</b>
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths or pertinent markers and sands. Attach the Bond under which the work will be performed or provide the Bond No. on file with the BLM/ BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notice shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

- 5-10-13: Failed annual IMIT witnessed by NMOCD-Artesia field rep. Received directive to shut well in.
- 5-20-13: MIRU Mesa Well Serv. #207, unset packer, POOH w/2-3/8" tbg & packer.
- 5-21-13: RU tbg testers, RIH w/2-3/8" packer & 2-3/8" tbg, set packer @ 2607'. RU chart recorder & pressure up to 520 psi, held for 30 min w/o psi loss.
- 5-22-13: Unset packer & reset @ 2576'.
- 5-23-13: RU testing unit to chart psi, pressure up to 525 psi for 25 min. Good test. NU injection line, open valve. RDMO. Rig released.

Attached: Test Chart dated 5/23/13.  
*W. Saale 6/26/13*  
Accepted for record  
NMOCD RE

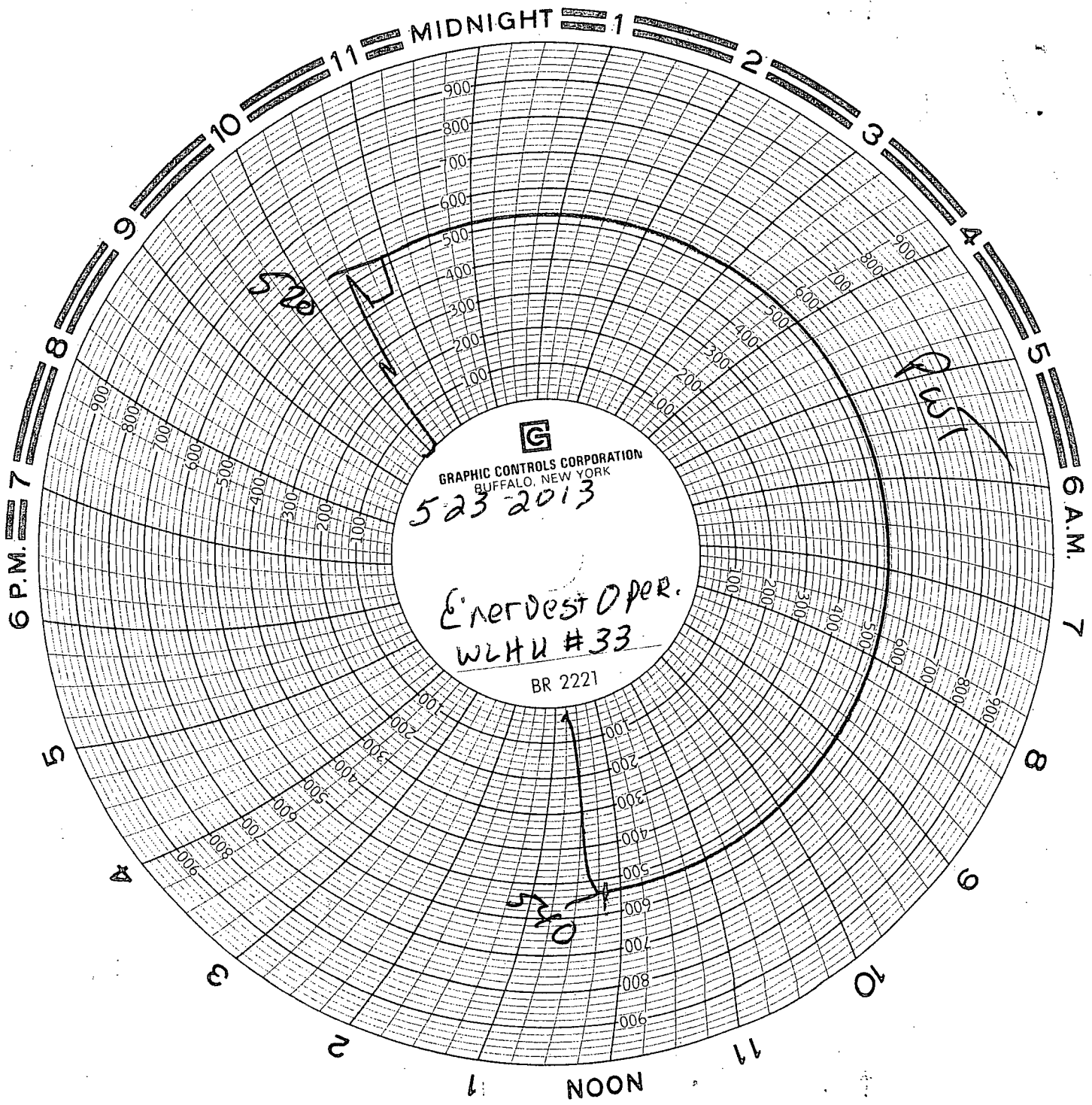
**RECEIVED**  
JUN 25 2013  
NMOCD ARTESIA

**ACCEPTED FOR RECORD**  
JUN 22 2013  
*[Signature]*  
BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE  
Regulatory Analyst

14. I hereby certify that the foregoing is true and correct.	
Name (Printed/ Typed) <b>Bart Trevino</b>	Title <b>Regulatory Analyst</b>
Signature <i>[Signature]</i>	Date <b>June 11, 2013</b>

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved by	Title	Date
Conditions of approval, if any are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	Office	



5-23-2013

Energest Oper.  
WLU #33

BR 2221

520

520

520

Ernest  
R. R.

Stone  
S. Center

ITT Barton  
Calibrated  
2-12-2013