

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. #4 (30-015-25527)
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. NMNM106832X
7. Lease Name or Unit Agreement Name West High Lonesome Penrose Sand Unit
8. Well Number #4
9. OGRID Number 001903
10. Pool name or Wildcat High Lonesome Queen

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator Beach Exploration, Inc.	
3. Address of Operator 800 North Marienfeld, Suite 200, Midland, TX 79701	
4. Well Location Unit Letter <u>E</u> : <u>988</u> feet from the <u>WEST</u> line and <u>2310</u> feet from the <u>NORTH</u> line Section <u>17</u> Township <u>16S</u> Range <u>29E</u> NMPM <u>EDDY</u> County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____	
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>
	CONVERT TO INJECTION WELL <input checked="" type="checkbox"/>

13. 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 recompletion.

10/12/06
MIRUPU, POOH LD rods, UFWH, TOOH tbg. SDON.

10/13/06
RIH, 3 1/4" bit and scaper to 1,778' POOH LD tbg. Bit and scaper. RIH AD-1 IPC pkr. SN and 54 jts. Duo line 10 tbg. Flush csg with 20 bbls water on strong Vac. Set pkr. 14 pts tension, load csg with packer fluid 8 bbls. To load worked air off Run H-5 test pressure at 360# for 30 min passed OK. OCD was not present at time of test. Rig up injection head started injecting water at a rate of 200 BPD. RDMOPU.

MIT Chart attached.

Chart on file

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Brenda Martin TITLE Regulatory Analyst DATE 11/1/06

Type or print name Brenda Martin E-mail address: bmartin@beach.com Telephone No. (432) 683-6226
For State Use Only

APPROVED BY: Gary Guye TITLE Deputy Field Inspector DATE JAN 24 2007
Conditions of Approval (if any): District II - Artesia