

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. Type of Well Oil Well Gas Well Dry Other
 b. Type of Completion: New Well Work Over Deepen Plug Back Diff. Resvr.,
 Other Convert to SWD

5. Lease Serial No.
LC-029392 B
 6. If Indian, Allottee or Tribe Name
 7. Unit or CA Agreement Name and No.

2. Name of Operator **Endurance Resources, LLC**

8. Lease Name and Well No.
Hinkle B Federal 19

3. Address **P.O. Box 1466, Artesia, NM 88211**

3a. Phone No. (include area code)
575-308-0722

9. AFI Well No.
30-015-24527

4. Location of Well (Report location clearly and in accordance with Federal requirements)*

At surface **990' FNL & 330' FWL**

Sec. 37

At top prod. interval reported below **Same**

At total depth **Same**

10. Field and Pool, or Exploratory
Shugart Y-7R-Qn-GB

11. Sec., T., R., M., on Block and Survey or Area **T18S-R31E**

12. County or Parish **Eddy** 13. State **NM**

14. Date Spudded
08/18/1983

15. Date T.D. Reached
08/27/1983

16. Date Completed **3-8-13**
 D & A Ready to Prod.

17. Elevations (DF, RKB, RT, GL)*

18. Total Depth: MD
TVD

19. Plug Back T.D.: MD
TVD

20. Depth Bridge Plug Set: MD
TVD

21. Type Electric & Other Mechanical Logs Run (Submit copy of each)

22. Was well cored? No Yes (Submit analysis)
 Was DST run? No Yes (Submit report)
 Directional Survey? No Yes (Submit copy)

23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sks. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2 3/8"	3380	3380	4 1/2"	3380				

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) Queen/Grayburg	3410	3902	3410-3902			
B)						
C)						
D)						

26. Perforation Record

27. Acid, Fracture, Treatment, Cement Squeeze, etc.

Depth Interval	Amount and Type of Material
3410-3902	None

RECEIVED
JUN 25 2013
NMOCD ARTESIA

28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SJ	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	<div style="border: 1px solid black; padding: 5px; display: inline-block;"> ACCEPTED FOR RECORD JUN 23 2013 <i>[Signature]</i> </div>
			→						

28a. Production - Interval B

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SJ	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	<div style="border: 1px solid black; padding: 5px; display: inline-block;"> ACCEPTED FOR RECORD JUN 23 2013 <i>[Signature]</i> </div>
			→						

* (See instructions and spaces for additional data on page 2)

BUREAU OF LAND MANAGEMENT
 CARLSBAD FIELD OFFICE

[Handwritten initials]

28b. Production - Interval C

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	

28c. Production - Interval D

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	

29. Disposition of Gas (Sold, used for fuel, vented, etc.)

30. Summary of Porous Zones (Include Aquifers):

Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top
					Meas. Depth

32. Additional remarks (include plugging procedure):

33. Indicate which items have been attached by placing a check in the appropriate boxes:

- Electrical/Mechanical Logs (1 full set req'd.)
 Geologic Report
 DST Report
 Directional Survey
 Sundry Notice for plugging and cement verification
 Core Analysis
 Other:

34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions)*

Name (please print) RANDALL HARRIS Title Geologist

Signature [Signature] Date 5/30/13

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.