

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD-ARTESIA

FORM APPROVED
OMB NO. 1004-0137
Expires July 31, 2010

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

2. Name of Operator

EnerVest Operating, LLC

3. Address

1001 Fannin Street, Suite 800, Houston, Tx 77002-6707

3a. Phone No. (include area code)

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

At surface 1360' FSL and 1405' FWL (Unit K)

At top prod. interval reported below

At total depth

14. Date Spudded

11/09/09

15. Date T.D. Reached

11/14/09

16. Date Completed

☐ D & A☒ Ready to Prod.

5/4/10

18. Total Depth: MD
TVD

2811

19. Plug Back T.D.: MD
TVD

2758

20. Depth Bridge Plug Set: MD
TVD

MD

TVD

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

GR/OCL/CEL

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
12-1/4	8-5/8	24	Surf	397		416 sxs		Surf	
	LS								
7-7/8	5-1/2	15.5	Surf	2800		500 sxs		Surf	
	J-55								

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2-7/8	2714							

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) Grayburg	2550	2700	2656 - 2678	0.5	88	Open
B)						
C)						
D)						

26. Perforation Record

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

Depth Interval	Amount and Type of Material
2656 - 2678	Acidize w/2000 gal 15% HCL, Frac using 25000# 16/30 sand

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
5/4/10	4/19/10	24	→	4.0	6	9	36.10		
Choke Size	Tbg. Press. Flwg. SI	Csg. Press. SI	24 Hr.	Oil BBL	Gas MCF	Water BBL	Gas: Oil Ratio	Well Status	
64/64	84	86	→	5.0	0	9.18		Producing	

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. SI	Csg. Press. SI	24 Hr.	Oil BBL	Gas MCF	Water BBL	Gas: Oil Ratio	Well Status	
			→						

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

5. Lease Serial No.

LC-050429B

6. If Indian, Allottee or Tribe Name

7. Unit or CA Agreement Name and No.

8. Lease Name and Well No.

WLH GAS Unit #43

9. API Well No.

30-015-37028

10. Field and Pool, or Exploratory

Loco Hills; Qu-GB-SA

11. Sec., T., R., M., or Block and Survey or Area

Sec. 12, T18S-R29E

12. County or Parish

Eddy

13. State

NM

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

3494' GL, 12' RKB

ACCEPTED FOR RECORD

JUL 23 2010

/s/ Roger Hall

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

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. →	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. →	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
				T. Salt	400
				B. Salt	920
				Yates	1045
				7 Rivers	1925
				Queen	2135
				Grayburg	2510
				G4 Sand	2632

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) Shirley GalikTitle Sr. Regulatory TechnicianSignature Shirley GalikDate 6/16/10

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.