

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

Oil Cons.

FORM APPROVED
OMB No. 1004-0135
Expires November 30, 2000

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well

☐ Oil Well ☐ Gas Well ☒ Other **Injection Well**

2. Name of Operator

Beach Exploration, Inc

3a. Address

800 N. Marienfeld, Ste. 200, Midland, TX 79701

3b. Phone No. (include area code)

915-683-6226

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 20 Unit C, T16S, R29E, 330FNL & 2310 FWL

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

West High Lonesome Unit

8. Well Name and No.

WHLU #23

9. API Well No.

30-015-02759

10. Field and Pool, or Exploratory Area

High Lonesome Queen

11. County or Parish, State

Eddy County, New Mexico

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

TYPE OF SUBMISSION

- ☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input checked="" type="checkbox"/> Alter Casing | <input type="checkbox"/> Fracture Treat | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input type="checkbox"/> Other |
| <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | |
| <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 recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with 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 recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices 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.)

Procedure (formerly lses #3)

1. Fill open hole from 1590' to 1821' w/sand.
2. Run 5 1/2 " csg inside 7" csg to 1590'; cmt 5 1/2" csg inside 7" csg
3. Replace wellhead, clean out sand
4. RIH w/plastic coated AD-1 tension pkr, plastic coated seating nipple & 2 3/8" J-55 PVC lined tbg. Load backside w/PF; st pkr 1490'-1590' Flang up well head.
5. Conduct OCD injection well integrity test
6. Prepare for injection

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Lizbeth Lodle

Title **Engineering Analyst**

Signature

Lizbeth Lodle

Date **July 31, 2002**

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

(ORIG. SGD.) ALEXIS C. SWOBODA

PETROLEUM ENGINEER

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.

Title

Date

AUG 05 2002

Office

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.

Accepted for record
NMOCD