

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

STAMPS IN TR  
(Other instruct.  
verse side)

CATE  
on re

Form approved.  
Budget Bureau No. 1004-01  
Expires August 31, 1985

4/58

RECEIVED NM 26072

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

FEB 6 9 55 AM '89

CARLS  
AREA

RECEIVED

FEB 10 '89

O. C. D.  
ARTESIA, OFFICE

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Beach Exploration, Inc. ✓

3. ADDRESS OF OPERATOR

800 N. Marienfeld Suite 200 Midland, Texas 79701

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface

2310' FNL & 1650' FEL (Unit G)  
(SW/4 NE/4)

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3641.4 GL

5. LEASE DESIGNATION AND SERIAL NO

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. AGREEMENT NAME

8. FIRM OR LEASE NAME

Exxon A. Federal

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

High Lonesome (Queen)

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 18, T16S, R29E

12. COUNTY OR PARISH

Eddy

13. STATE

NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON\*

SHOOTING OR ACIDIZING

ABANDONMENT\*

REPAIR WELL

CHANGE PLANS

(Other)

(Other)

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) \*

1-31-89 Displace hole with 2% KCL Water, spotted acid, ran correlation log, perforated 12 holes from 1702-1722'. Acidized with 1200 Gals 15% NeFe Acid.

2-1-89 Fraced well with 20,000# My-T-Gel Lt.+ 30,000# 20/40 Sand, 12,000# 12/20 Sand Flushed with 1150 Gals KCL Water

2-2-89 Ran pump and rods, put well to pumping.

18. I hereby certify that the foregoing is true and correct

SIGNED

*Agustina M. M. M.*

TITLE Production

DATE 2-3-89

(This space for Federal or State office use)

APPROVED BY

TITLE

ACCEPTED FOR RECORD

DATE

CONDITIONS OF APPROVAL, IF ANY:

FEB 7 1989

\*See Instructions on Reverse Side

SAS  
CARLSBAD, NEW MEXICO