

UNITED STATES
DEPARTMENT OF THE INTERIOR **OCD-ARTESIA**
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0137
Expires July 31, 2010

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input checked="" type="checkbox"/> Other Injector			5. Lease Serial No. LC-058481		
b. Type of Completion: <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Diff Resvr, Other _____			6. If Indian, Allottee or Tribe Name		
2. Name of Operator EnerVest Operating, LLC			7. Unit or CA Agreement Name and No		
3. Address 1001 Fannin Street, Suite 800, Houston, Tx 77002-6707			8. Lease Name and Well No. WLH G4S Unit #53		
3a. Phone No. (include area code) 713.495.1514			9. API Well No. 30-015-37016		
4. Location of Well (Report location clearly and in accordance with Federal requirements)* At surface 1980' FNL and 1980' FWL (Unit F) At top prod. interval reported below At total depth			10. Field and Pool, or Exploratory Loco Hills; Qu-GB-SA		
14. Date Spudded 02/02/10			11. Sec., T, R., M., or Block and Survey or Area Sec. 11, T18S-R29E		
15. Date T.D. Reached 02/10/10			12. County or Parish Eddy County		
16. Date Completed <input type="checkbox"/> D & A <input type="checkbox"/> Ready to Prod 6/19/10			13. State NM		
18. Total Depth: MD 2780 TVD			17. Elevations (DF, RKB, RT, GL)* 3515' GL, 12', RKB		
19. Plug Back T.D.: MD 2725 TVD			20. Depth Bridge Plug Set: MD MD TVD		
21. Type Electric & Other Mechanical Logs Run (Submit copy of each) GR/CCL/CBL			22. Was well cored? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit report) Directional Survey? <input checked="" type="checkbox"/> No <input type="checkbox"/> 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 Cement Depth	No of Sks & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
12-1/4	8-5/8	24	Surf	389		265 sxs		Surf	
	J-55								
7-7/8	4-1/2	10.5	Surf	2769		600 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)	
2-3/8	2609	2604							

25. Producing Intervals				26. Perforation Record			
Formation	Top	Bottom		Perforated Interval	Size	No Holes	Perf Status
A)				2642-2671	0.5	180	Open
B)							
C)							
D)							

27. Acid, Fracture, Treatment, Cement Squeeze, Etc.	
Depth Interval	Amount and Type of Material
2620-2648	Acidize w/5000 gal 15% NEFE-HCL, Frac using 30000# 16/30 Brady

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

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):

Pit Closure on 02/10/10
Injection commenced on 6/18/10

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:

4. 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 Galik / smDate 7/02/10

Under 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.