Form 3160-5 (August 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

OCD Artesia

FORM APPROVED OMB No 1004-0137 Expires July 31, 2010

5. Lease Serial No

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SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.					6. If Indian, Allottee or Tribe Name		
SUBMIT IN TRIPLICATE – Other instructions on page 2.					7. If Unit of CA/Agreement, Name and/or No NMNM106832X		
1. Type of Well	<u> </u>				8 Well Name and No.		
Oil Well Gas Well Other					West High Lonesome Penrose Sand Unit # (Lo		
2. Name of Operator Beach Exploration, Inc.					9. API Well No. 30-0/5-24345		
3a. Address 3b Phone No. (include 800 N Marienfeld, Suite 200, Midland, TX 79701 432/683-6226				de)	10. Field and Pool or Exploratory Area W. HIGH LONESOME QUEEN		
4. Location of Well (Footage, Sec., T.,R.,M., or Survey Description) Section 17, 18, 19 & 20, T-16-S, R-29-E, Eddy County, NM					11 Country or Parish, State EDDY		
12. CHEC	K THE APPROPRIATE BOX(ES) TO INDI	CATE NATURE	E OF NOTIO	CE, REPORT OR OTHE	R DATA	
TYPE OF SUBMISSION TYPE OF AC					ION		
Notice of Intent	Acidize De		en ure Treat	Production (Start/Resume) Reclamation		☐ Water Shut-Off ☐ Well Integrity	
Subsequent Report	Casing Repair	New (Construction	Reco	omplete	Other Equipment S	Storage
Subsequent Report	Change Plans	Plug a	and Abandon		porarily Abandon	area and unit c	ean up
Final Abandonment Notice	Convert to Injection.	Plug l	Back	☐ Wate	er Disposal		
determined that the site is ready for Reference inspection November 18, The approved storage area located non-essential equipment and junk h your instructions. This should meet	at WHLPSU # 16 has been cave been removed from the our extended compliance da	completed and unit area, no ate for the er	nd essential union-essential flow and of February 2	v lines have	e been removed and un nk you for your conside	FOR RECORE	100
	L ocardonia de la composição de la comp	OCD AR	IESIA		BURZAU OF LA	ND MANAGEMENT	
14 I hereby certify that the foregoing is t Jack M. Rose	rue and correct Name (Printed/I	yped)		ι		THE STATE	ا _.
$ \mathcal{U}$			Title Engineer				
Signature Jan C	Me This		Date 02/24/20	011			
	THIS SPACE FO	OR FEDE	RAL OR ST	ATE OF	FICE USE		
Approved by							
			Title		D	ate '	
Conditions of approval, if any, are attached that the applicant holds legal or equitable tentitle the applicant to conduct operations	itle to those rights in the subject le		ertify				
Title 18 U S C Section 1001 and Title 43	USC Section 1212, make it a cr	ime for any pe	rson knowingly a	nd willfully i	to make to any department	or agency of the United State	es any false,

(Instructions on page 2) Al 9/21/2011

fictitious or fraudulent statements or representations as to any matter within its jurisdiction

Accepted for record NMOCD