Form 3160-5 (August 2007)

entitle the applicant to conduct operations thereon

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

LC-060904

6 If Indian, Allottee or Tribe Name

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.

abandoned well. Use Fori	. ,	• •			
SUBMIT IN TRIPLICAT	TE - Other instructions	on page RECE	IVED	7 If Unit or CA	/Agreement, Name and/or N
1 Type of Well Onl Well Gas Well X Other Inject. 2. Name of Operator	JUL 2	JUL 2 1 2010 NMOCD ARTESIA		8 Well Name and No WLH G4S Unit #37	
EnerVest Operating, LLC	21.			9. API Well No.	
3a. Address 1001 Fannin St. Ste 800 Houst	Phone No (include area code) 713-495-1514		30-015-37021 10 Field and Pool, or Exploratory Area		
4. Location of Well (Footage, Sec., T., R., M., or Survey A.	con, Ix. 77002 Description)	710 400 10.	<u> </u>	Loco Hills;	•
Sec 12, T18S, R29E				11 County or I	
				Eddy County	
12. CHECK APPROPRIAT	E BOX(ES) TO INDIC	ATE NATURE OF N	OTICE, REPO	RT, OR OTHER	RDATA
TYPE OF SUBMISSION	TYPE OF ACTION				
Notice of Intent	Acidize Alter Casing	Deepen Fracture Treat	Production Reclamation	(Start/Resume) [Water Shut-Off Well Integrity
Subsequent Report	Casing Repair	New Construction	Recomplet	te [X Other MIT &
Final Abandonment Notice	Change Plans	Plug and Abandon	Temporani	ly Abandon	Commence Injection
That Abandonnent Notice	Convert to Injection	Plug Back	Water Disp	_	
determined that the final site is ready for final inspiration of the final site is ready for final inspiration. 4/27/10 Ran MIT - 500 ps Tubing set @ 2650 and pa	si for 30 min. With	essed by Richard	l Inge, NMOC	ID	
Injection commenced on 6			CEPTED I	FOR RECO	RD
Accepted for re NMOCD & 7/28	cord	B	JUL 1 / <mark>S/ Chris 1</mark> UREAU OF LAN CARLSBAD F	7 2010 Walls ID MANAGEMEN TELD OFFICE	IT
14 I hereby certify that the foregoing is true and correct Name (Printed/Typed) Shirley Galik		Title Sr. Re	gulatory Te	c h	
Signature Shirles Halik	Date 7/01				
	S SPACE FOR FEDER	AL OR STATE OFF	ICE USE		
Approved by		Title		Date	2
Conditions of approval, if any, are attached Approval of this not the applicant holds legal or equitable title to those rights in the su		at Office		L	

Title 18 U S C Section 1001, and Title 43 U S C Section 1212, makes 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