Submit I Copy To Appropriate District Office	State of New Mexico		Form C-103
<u>District I</u> – (575) 393-6161	Energy, Minerals and Natural Resources		Revised August 1, 2011
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283			WELL API NO. 30-015-32705
811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION		5. Indicate Type of Lease
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE FEE X
<u>District IV</u> - (505) 476-3460	Santa Fe, NM 87505		6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505			
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" (FORM C-101) FOR SUCH			7. Lease Name or Unit Agreement Name Juneau 31 Fee Com
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other			8. Well Number 1
2. Name of Operator BOPCO, L.P.			9. OGRID Number
BOPCO, L.P.			260737
3. Address of Operator P O Box 2760			10. Pool name or Wildcat
Midland, Tx 79702			WildcatG-02 S212831L; Delaware
4. Well Location			
Unit Letter P: 1980 feet from the South line and 660 feet from the West line			
Section 31 Township 21S Range 28E NMPM County Eddy			
11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
12. Check Ap	ppropriate Box to Indicate N	lature of Notice,	, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPO			SSEQUENT REPORT OF:
· · · · · · · · · · · · · · · · · · ·			RILLING OPNS. P AND A
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMEN		IT JOB	
DOWNHOLE COMMINGLE			
OTHER:	П	OTHER:	П
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date			
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.			
	2 approved 5/7/12 and was to be		artment working through issues with partners. 2. No changes were made on the submitted
akk	copy and		
			RECEIVED
			1111 1 0 2012
			JUL 1 2 2012
Approval Granted providing work			NMOCD ARTESIA
is complete by			
Cannot be extended any further. Must be plugged by this date			
	any succeso.	THUSE SEE S	ruggen my www mice
6 15			
Spud Date:	Rig Release Da	ate:	
No. of the contract of the con			
I hereby certify that the information ab	ove is true and complete to the h	act of my knowledge	ra and baliaf
Thereby certify that the information at	ove is true and complete to the b	est of my knowleds	ge and benef.
SIGNATURE Sandia 1.	BUL TITLE Sr. Re	oulatory Clerk	DATE 07/11/2012
S. S	TITLE OI, RC	Samoi y Civik	D/(11 0//11/2012
Type or print name Sandra J. Belt e	com PHONE: (432)683-2277		
For State Use Only	α		
APPROVED BY	TITLE		DATE 2/12/201
Conditions of Approval (if any):	Ap;	roval Granted provi	ding work
is complete by $\frac{10}{2}$			
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