

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED
OMB No. 1004-0137
Expires: March 31, 2007

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.

SUBMIT IN TRIPLICATE- Other instructions on reverse side.

1. Type of Well
☐ Oil Well ☐ ☐ Gas Well ☐ Other2. Name of Operator **BOPCO, L. P.**3a. Address
P. O. Box 2760 Midland, TX 797023b. Phone No. (include area code)
432-683-2277

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

**SHL: 150' FSL, 660' FWL, Sec. 28, T25S, R30E, Lat: N32.094024, Long: W103.892145
BHL: 100' FNL, 660' FWL, Sec. 28, T25S, R30E, Lat: N32.107825, Long: W103.892183**

5. Lease Serial No.

NMNM05039A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.
NMNM071016X8. Well Name and No.
PLU Ross Ranch 28-25-30 USA #1H9. API Well No.
30-015-4076510. Field and Pool, or Exploratory Area
Corral Canyon Bone Spring, South

11. County or Parish, State

Eddy

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<input checked="" type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

BOPCO, L.P. would like to utilize an armored, 5", 5000 psi WP flex hose for the choke line in the drilling of the well. This is rig equipment and will help quicken nipple up time thus saving money without a safety problem. The hose itself is rated to 5000 psi and has 5000 psi flanges on each end. This well is to be drilled to 13,675' MD (8,860' TVD) and max surface pressure should be +/- 1949 psi as prescribed in onshore order #2 shown as 0.22 psi/ft.

The Latshaw #14 flex hose certification is attached.

Accepted for record
12/13/2012
NMOCD

RECEIVED

JAN 02 2013

NMOCD ARTESIA

SEE ATTACHED FOR
CONDITIONS OF APPROVAL

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Christopher GieseTitle **Drilling Engineer**

Signature

Date **12/20/12**

APPROVED

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Title

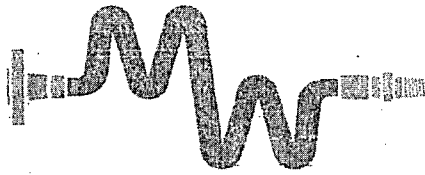
Office

DEC 21 2012

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

Title 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.

(Instructions on page 2)



Midwest Hose
& Specialty, Inc.

INTERNAL HYDROSTATIC TEST REPORT			
Customer: LATSHAW		Customer P.O. Number: 147340	
HOSE SPECIFICATIONS			
Type: Rotary / Vibrator Hose C & K / API 7K		Hose Length: 35FT 8 IN	
I.D. 3.5 INCHES		O.D. 5.02 INCHES	
WORKING PRESSURE 5,000 PSI	TEST PRESSURE 5,000 PSI		BURST PRESSURE N/A PSI
COUPLINGS			
Part Number D3.5X64WB NA	Stem Lot Number 3Q11LOT1 NA	Ferrule Lot Number 3Q11LOT1 NA	
Type of Coupling: Swage-It		Die Size: 5.75 INCHES	
PROCEDURE			
<i>Hose assembly pressure tested with water at ambient temperature.</i>			
TIME HELD AT TEST PRESSURE 9 1/4 MIN.		ACTUAL BURST PRESSURE: N/A PSI	
Hose Assembly Serial Number: 147340		Hose Serial Number: NA	
Comments: HOSE REPAIR			
Date: 4/11/2012	Tested: <i>Donna McElmore</i>		Approved: <i>Kim Thomas</i>



Midwest Hose
& Specialty, Inc.

Internal Hydrostatic Test Graph

April 11, 2012

Customer: Latshaw

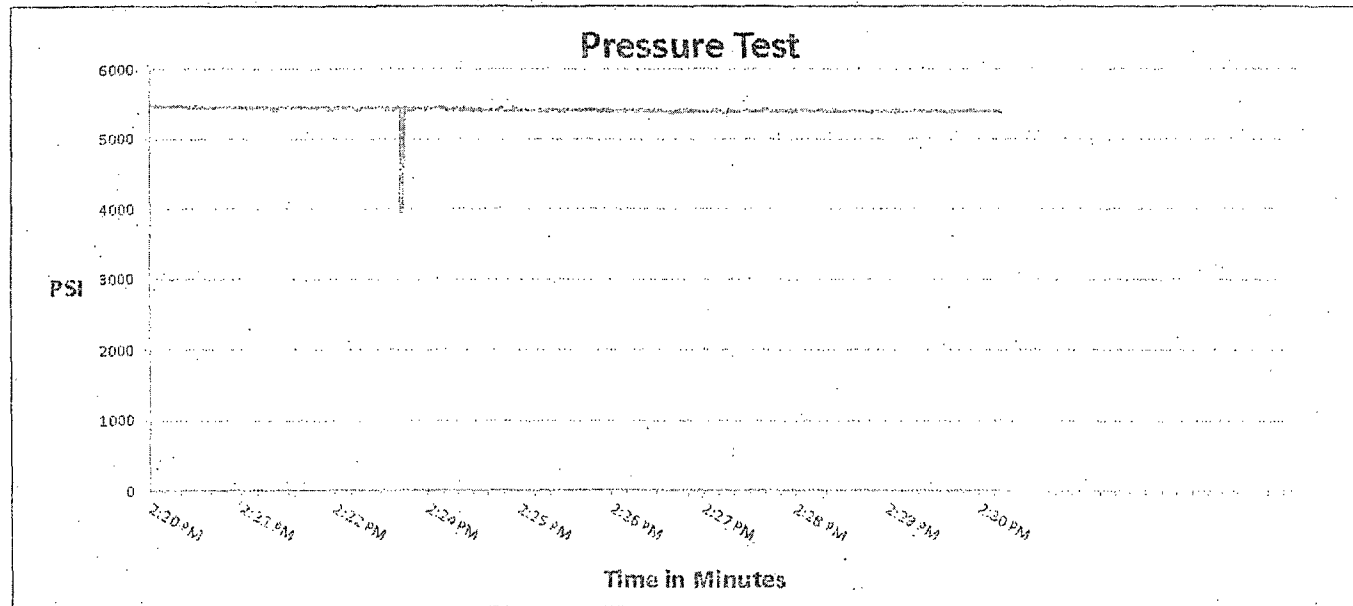
Pick Ticket #: 147340

Hose Specifications

<u>Hose Type</u>	<u>Length</u>
D	35' 8"
<u>I.D.</u>	<u>O.D.</u>
3.5"	5.02"
<u>Working Pressure</u>	<u>Burst Pressure</u>
3000 PSI	Standard Safety Multiplier Applies

Verification

<u>Type of Fitting</u>	<u>Coupling Method</u>
4 1/16 SK	Swage
<u>Die Size</u>	<u>Final O.D.</u>
5.75"	5.79"
<u>Hose Serial #</u>	<u>Hose Assembly Serial #</u>
NA	147340



Test Pressure
5000 PSI

Time Held at Test Pressure
9 1/4 Minutes

Actual Burst Pressure

Peak Pressure
5786 PSI

Comments: Hose assembly pressure tested with water at ambient temperature.

Tested By: Donnie Mclemore

Approved By: Kim Thomas

Donnie Mclemore

Kim Thomas

Conditions of Approval

BOPCO, L.P.

PLU Ross Ranch 28-25-30 USA #1H

API 30-015-40765

T25S-R30E, Sec 28

December 21, 2012

1. Variance approved to use flex line from BOP to choke manifold. Check condition of flexible line from BOP to choke manifold, replace if exterior is damaged or if line fails test. Line to be as straight as possible with no hard bends and is to be anchored according to Manufacturer's requirements. The flexible hose can be exchanged with a hose of equal size and equal or greater pressure rating. **Anchor requirements, specification sheet and hydrostatic pressure test certification matching the hose in service, to be onsite for review.** If the BLM inspector questions the straightness of the hose, a BLM engineer will be contacted and will review in the field or via picture supplied by inspector to determine if changes are required (operator shall expect delays if this occurs).

JAM 122112