

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

UCD-ARTESIA

FORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010

**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 <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMLC061616A
2. Name of Operator BOPCO LP		6. If Indian, Allottee or Tribe Name
3a. Address MIDLAND, TX 79702		7. If Unit or CA/Agreement, Name and/or No. 891000303X
3b. Phone No. (include area code) Ph: 432-683-2277		8. Well Name and No. PLU PIERCE CANYON 4 25 30 USA 1H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 4 T25S R30E NENE 150FNL 660FEL 32.166451 N Lat, 103.879099 W Lon		9. API Well No. 30-015-41137-00-X1
		10. Field and Pool, or Exploratory PIERCE CROSSING
		11. County or Parish, and State EDDY COUNTY, NM

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

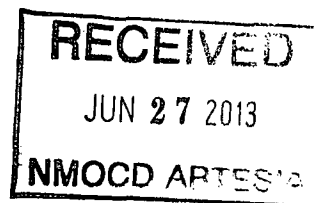
TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> 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 checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Change to Original A
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	PD

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 recompleat 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 recompleat 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. respectfully requests to change plans for BOP testing due to the utilization of the Cameron MBS wellhead. BOPCO L.P. respectfully requests to nipple up and test BOPE on surface casing to 3,000 psi high and 250 psi low which will cover testing requirements for the duration of the well. Please find attached the schematic of the wellhead, the field report from the Cameron representative and the BOP test information.

Please see attached documents.

*CRDade 7/2/13*  
*Accepted for record*  
NMOC



*Not a request work has been Completed.*

14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #210417 verified by the BLM Well Information System For BOPCO LP, sent to the Carlsbad Committed to AFMSS for processing by KURT SIMMONS on 06/18/2013 (13KMS6459SE)	
Name (Printed/Typed) CHRISTOPHER VOLEK	Title DRILLING ENGINEER
Signature (Electronic Submission)	Date 06/12/2013

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By <b>ACCEPTED</b>	CHRISTOPHER WALL'S Title PETROLEUM ENGINEER	Date 06/25/2013
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.		
Office Carlsbad		

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.

**\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\***

Date \_\_\_\_\_ Date \_\_\_\_\_



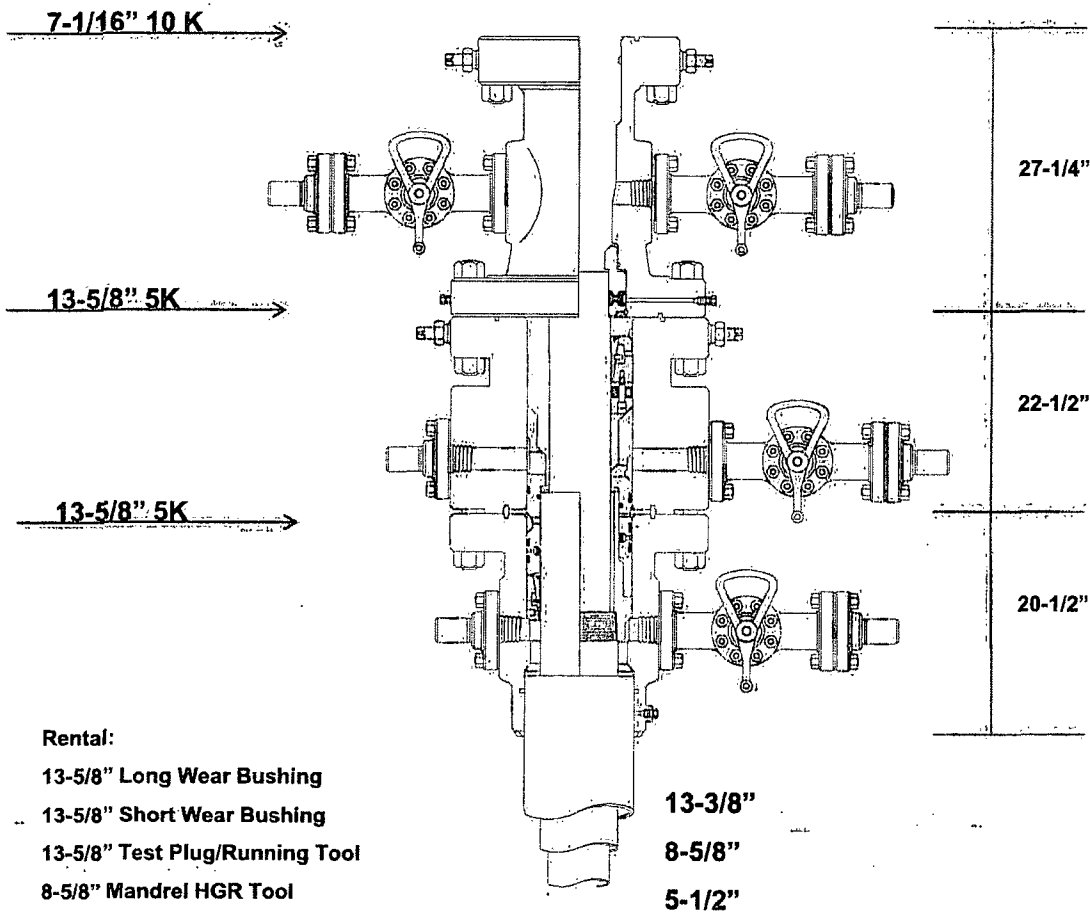
**CUSTOMER: BOPCO**

**PROJECT: Poker Lake Unit Big Sinks 1-25-30 USA#1**

**RIG: Latshaw #14**

**CASING PROGRAM: 13-3/8" x 8-5/8" x 5-1/2"**

**DATE: May 6<sup>th</sup> 2013**



**Rental:**

**13-5/8" Long Wear Bushing**

**13-5/8" Short Wear Bushing**

**13-5/8" Test Plug/Running Tool**

**8-5/8" Mandrel HGR Tool**

**Packoff Support Bushing Running Tool**

**Jetting/Wash Tool**



PO Box 7  
Lovington, NM 88260  
(575) 942-9472

Invoice  
B 02155

# BOP Test

Date 6-10-13 Start time 11:30 ☐ am ☒ pm  
Company Ba. Br. State NM County Cur  
Lease Blue Ridge  
Company Man \_\_\_\_\_  
Toolpusher \_\_\_\_\_ Tester Rance Severs  
Drilling Contractor Continuum Rig # 10

Test Pressures	
BOP:	<u>3000</u>
Annuler:	<u>2500</u>
Casing:	<u>1200</u>
Pumps:	<u>3000</u>

Test #	Items tested	Low Test		High Test		Remarks
		PSI	Min.	PSI	Min.	
1	Track	250	10	300	10	ch. Kan pressure 10 3000
2	2, 3, 6, 10, 12	250	10	300	10	blow to 2300 in Torque
3	1, 2, 6, 10, 12	250	10	300	10	Test a 7 blow worked in line
4	3, 4, 5, 10, 13	250	10	300	10	Test 1 g. w. Test # 5 7.1.1
5	3, 4, 5, 6, 9, 12	250	10	300	10	worked w. valves Test 1 g. w.
6	5, 11, 12	250	10	300	10	Test # 10 1.1.1 g. w. Test
7	7, 11, 12	250	10	300	10	Labop. Test 1 g. w.
8	7, 11, 13	250	10	250	10	
9	18	250	10	300	10	
10	17	250	10	300	10	
11	21, 22, 23	250	10	300	10	
12	24	250	10	300	10	
13	19	250	10	300	10	
14	3, 4, 5, 11, 13, 16, 17	—	—	1200	3.1	

HR @ \_\_\_\_\_ = \_\_\_\_\_  
Mileage @ \_\_\_\_\_ /mile = \_\_\_\_\_  
Methanol \_\_\_\_\_ = \_\_\_\_\_  
Cup Test \_\_\_\_\_ = \_\_\_\_\_  
@ \_\_\_\_\_ = \_\_\_\_\_  
@ \_\_\_\_\_ = \_\_\_\_\_  
Subtotal = \_\_\_\_\_  
Tax = \_\_\_\_\_  
TOTAL = \_\_\_\_\_

Test accepted by: Michael B. Severs  
  
Plu Price (Payor 4) 30  
25388  
1120  
6-10-13  
Michael B. Severs

