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

## NMOCD Artesia

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

## 5. Lease Serial No. NMLC061616A

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an
ibandoned well. Use form 3160-3 (APD) for such proposals

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abandoned wei	6. If	6. If Indian, Allottee or Tribe Name						
SUBMIT IN TRI	7. If	7. If Unit or CA/Agreement, Name and/or No.						
I. Type of Well		8. Well Name and No.						
☑ Oil Well ☐ Gas Well ☐ Oth		POKER LAKE CVX JV BS 016H						
2. Name of Operator BOPCO LP	Contact: TRAC E-Mail: tjcherry@basspet			Pi Well No. 0-015-40581-0	0-S1			
3a. Address P O BOX 2760 MIDLAND, TX 79702		Phone No. (include area code 432-221-7379		10. Field and Pool, or Exploratory WILDCAT				
4. Location of Well (Faotage, Sec., T.	, R., M., or Survey Description)		· 11, (	County or Parish, a	and State			
Sec 3 T25S R30E SWSE 2001	FSL 2130FEL		E	DDY COUNTY	, NM			
					•			
12. CHECK APPR	OPRIATE BOX(ES) TO IND	ICATE NATURE OF	NOTICE, REPOR	T, OR OTHER	R DATA			
TYPE OF SUBMISSION		TYPE OF ACTION						
□ Notice of Intent	☐ Acidize	☐ Deepen	☐ Production (St	art/Resume)	☐ Water Shut-Off			
_	☐ Alter Casing	☐ Fracture Treat	☐ Reclamation		■ Well Integrity			
Subsequent Report	Casing Repair	■ New Construction	☐ Recomplete		<b>⊠</b> Other			
☐ Final Abandonment Notice	□ Change Plans	□ Plug and Abandon	☐ Temporarily A	bandon	Venting and/or Flari ng			
	☐ Convert to Injection	□ Plug Back	Water Disposa	Ī				
April through June, 2015 at the	its this sundry notice to report the referenced location.  ary due to restricted pipeline ca	,	NINA C	II CONSE	DESTRUCTION OF THE PROPERTY OF			
April - 493 MCF				ARTESIA DIST	17.0			
May - 174 MCF June - 170 MCF	. •			OCT 3 0 2	לוטי			
Gas was metered prior to flare	and flared amounts reported or	n monthly production re	eports	RECEIV	ED			
			Δ	[//]				
14. I hereby certify that the foregoing is	Electronic Submission #313384 For BOPCO	LP, sent to the Carlsba	d[/_/	_/ /	/			
Name (Printed/Typed) TRACIE J	itted to AFMSS for processing by CHERRY		ATORYFANAFYBI		ORDI			
Time(trimetal)pesy 110 (OIE 0	OTTENT	TAIL NEGGE			hi di			
Signature (Electronic St	ubmission)	Date 08/20/2	015 / AGT	in land				
	THIS SPACE FOR FE	DERAL OR STATE	OFFICE USE	1 A2013				
Approved By		Title	BUREAU OF YA	VDANAGEME	Date ,			
onditions of approval, if any, are attached ertify that the applicant holds legal or equihich would entitle the applicant to conduc	table title to those rights in the subject	ant or	7/CARLSB/ID	HISCU-UI, LICE				
itle 18 U.S.C. Section 1001 and Title 43 U States any false, fictitious or fraudulent st	J.S.C. Section 1212, make it a crime fo atements or representations as to any m	r any person knowingly and natter within its jurisdiction.	willfully to make to an	y department or a	gency of the United			