1625 N French Dr., Hobbs, NM 88240 NM OIL CONSERVATION of New Mexico Phone: (575) 393-6161 Fax: (575) 393-0720 District 1

District !! 811 S. Fir. t St., Artesia, NM 88210 Phone: (575) 748-1283 Fax: (575) 748-9720 District III 1000 Rio Brazos Road, Aztec, NM 87410

Phone: (505) 334-6178 Fax: (505) 334-6170 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505 Phone: (505) 476-3460 Fax: (505) 476-3462

1 API Number

T23S

¹³ Joint or Infill

12 Dedicated Acres

320.00

R27E

Consolidation Code

² Pool Code

ARTHMAGY, SMIRE rals & Natural Resources Department

MAR 0 2020 PONSERVATION DIVISION 1220 South St. Francis Dr.

Santa Fe, NM 87505 RECEIVED

Form C-102 Revised August 1, 2011 Submit one copy to appropriate District Office



EDDY

WELL LOCATION AND ACREAGE DEDICATION PLAT

] 3	30-015-43869			98220		PURPLE SAGE; WOLFCAMP GAS				
4 Property	⁴ Property Code		⁵ Property Name						⁶ Well Number	
		CASS 16 STATE						Į	3H	
OGRID No.		Operator Name						9	⁹ Elevation	
160825		B.C. OPERATING, INC.						3160		
					¹⁰ Surface Lo	ocation				
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County	
E	16	T23S	R27E		1983'	NORTH	126'	WEST	EDDY	
			" Bot	tom Hole	Location If I	Different From	Surface			
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County	

NORTH

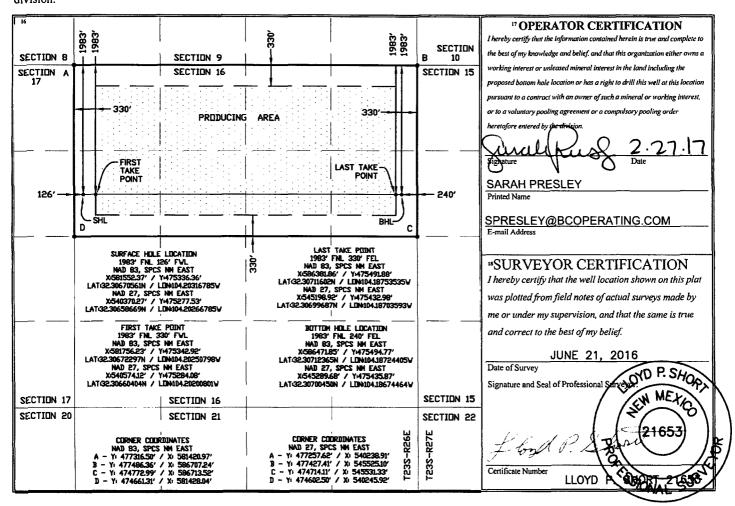
240

EAST

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

1983'

¹⁵ Order No.



Subnait I Copy To Appropriate District Office State of New Mexi											
<u>District I</u> – (575) 393-6161 Energy, Minerals and Natural 1625 N. French Dr., Hobbs, NM 88240	WELL API NO.										
District II - (575) 748-1283 811 S. First St., Artesia, NM 88210 OIL CONSERVATION D	IVISION 30-015-43869										
District III – (505) 334-6178 1220 South St. Franci	1.5 Indicate Type of Lease										
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460 Santa Fe, NM 8750	6. State Oil & Gas Lease No.										
1220 S. St. Francis Dr., Santa Fe, NM 87505											
SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name										
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR	BACK TO A SUCH CASS 16 STATE										
PROPOSALS.)	8. Well Number 3H										
1. Type of Well: Oil Well ☐ Gas Well ☒ Other 2. Name of Operator	9. OGRID Number										
BC OPERATING, INC.	160825										
3. Address of Operator P.O. POV 50820, MIDI AND, TV 70710	10. Pool name or Wildcat FOREHAND RANCH; WOLFCAMP (GAS)										
P.O. BOX 50820, MIDLAND, TX 79710 FOREHAND RANCH; WOLFCAMP (GAS) 4. Well Location											
4. Well Location Unit Letter E : 1983 feet from the NORTH line and 126 feet from the WEST line											
	nge 27E NMPM EDDY County										
11. Elevation (Show whether DR, R.											
12. Charle Ammaniete Den te Indicate Nat											
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data											
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:											
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASIN											
TEMPORARILY ABANDON ☐ CHANGE PLANS ☒ COMMENCE DRILLING OPNS.☐ P AND A PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐ CASING/CEMENT JOB ☐											
DOWNHOLE COMMINGLE	, lo 110, o 2 111, 111, 111, 111, 111, 111, 111,										
CLOSED-LOOP SYSTEM											
	OTHER:										
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.											
BC OPERATING, INC. RESPECTULLY REQUESTS TO CHA	NGE THE POOL FOR THE SUBJECT WELL										
FROM: FOREHAND RANCH; WOLFCAMP (GAS)											
TO: PURPLE SAGE; WOLFCAMP (GAS)	NM Oil Conservation										
	ARTESIA DISTRICT										
	MAR 0 1 2017										
RECEIVED											
Spud Date: Rig Release Date:											
Spud Date. Rig Release Date.											
I hereby certify that the information above is true and complete to the best of my knowledge and belief.											
SIGNATURE CURALL HALS TITLE REGUL	ATORY ANALYST DATE 2.27.2017										
Type or print name <u>SARAH PRESLEY</u> E-mail address: <u>SPRESLEY@BCOPERATING.COM</u> PHONE: <u>432-684-9696</u> For State Use Only											
Accepted For Record											
APPROVED BY:NMOCDTITLE_	DATE										
Conditions of Approval (if any):											