une 2015) B SUNDRY Do not use th	UNITED STATE				
SUNDRY Do not use th	Form 3160-5 (June 2015) UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT		OMB	FORM APPROVED OMB NO. 1004-0137 Expires: January 31, 2018	
Do not use th	SUNDRY NOTICES AND REPORTS ON WELLS			37	
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.				6. If Indian, Allottee or Tribe Name	
SUBMIT IN TRIPLICATE - Other instructions on page 2 1. Type of Well S Oil Well Gas Well Other			7. If Unit or CA/Ag 891000558X	 If Unit or CA/Agreement, Name and/or No. 891000558X Well Name and No. JAMES RANCH UNIT DI2 192H 	
			8. Well Name and N JAMES RANCH		
2. Name of Operator BOPCO LP Contact: KELLY KARDOS E-Mail: kelly_kardos@xtoenergy.com			9. API Well No. 30-015-43370-00-X1		
3a. Address 6401 HOLIDAY HILL RD BLC MIDLAND, TX 79707	DG 5 SUITE 200	3b. Phone No. (include area code Ph: 432-620-4374	ea code) 10. Field and Pool or Exploratory Area LOS MEDANOS		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description))	11. County or Parish, State		
Sec 25 T22S R30E NESW 26 32.214631 N Lat, 103.501057	600FSL 1910FWL 7 W Lon		EDDY COUNT	ΓY, NM	
12. CHECK THE A	PPROPRIATE BOX(ES)	TO INDICATE NATURE O	F NOTICE, REPORT, OR OT	HER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION				
□ Notice of Intent	Acidize	Deepen	Production (Start/Resume)	□ Water Shut-Off	
	Alter Casing	Hydraulic Fracturing	Reclamation	Well Integrity	
Subsequent Report	Casing Repair	New Construction	Recomplete	I Other	
Final Abandonment Notice	Change Plans	Plug and Abandon	Temporarily Abandon	Change to Original A	
	Convert to Injection	Plug Back	Water Disposal	10	
BOPCO, LP requests approva Directional Drill Plan Drilling Program C102 BOP/Choke Design Flex Hose Variance Please see attached			RECE APR 2 I Office ^{istrict II-AR} Sia	B 2010	
		OCD Arte	sia		
	· · · · ·	•	· · · ·	•	
 I hereby certify that the foregoing is Com 	Electronic Submission #3	96435 verified by the BLM Wel OPCO LP, sent to the Carlsba ssing by PRISCILLA PEREZ or		<u> </u>	
Name (Printed/Typed) KELLY KA	RDOS		ATORY COORDINATOR		
Signature (Electronic S	Submission)	Date 11/30/20	017		
•	THIS SPACE FO	R FEDERAL OR STATE (OFFICE USE	· · · · · · · · · · · · · · · · · · ·	
0,					
DDROVED BY ZOTA STEVENS	nditions of approval, if any, are attached. Approval of this notice does not warrant of tify that the applicant holds legal or equitable title to those rights in the subject lease			Date 02/16/2018	
ify that the applicant holds legal or equ	utable title to those rights in the	subject lease			
ditions of approval, if any, are attached ify that the applicant holds legal or equ ch would entitle the applicant to conduc e 18 U.S.C. Section 1001 and Title 43 [itable title to those rights in the ct operations thereon.	Office Carlsbad		agency of the United	
ditions of approval, if any, are attached ify that the applicant holds legal or equ ch would entitle the applicant to condu e 18 U.S.C. Section 1001 and Title 43 (ates any false, fictitious or fraudulent s tructions on page 2)	itable title to those rights in the ct operations thereon. U.S.C. Section 1212, make it a of tatements or representations as	Office Carlsbad rime for any person knowingly and to any matter within its jurisdiction.			