

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTCarlsbad Field Office
NEW ArtesiaFORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018**SUNDRY NOTICES AND REPORTS ON WELLS**
Do not use this form for proposals to drill or re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other instructions on page 2		5. Lease Serial No. NMLC065705B
1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		6. If Indian, Allottee or Tribe Name
2. Name of Operator BOPCO LP		7. If Unit or CA/Agreement, Name and/or No. 891000303X
Contact: CHERYL ROWELL E-Mail: Cheryl_rowell@xtoenergy.com		8. Well Name and No. POKER LAKE UNIT 18 BD 103H
3a. Address 6401 HOLIDAY HILL RD BLDG 5 SUITE 200 MIDLAND, TX 79707	3b. Phone No. (include area code) Ph: 432 671 8205	9. API Well No. 30-015-44891-00-X1
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 18 T25S R30E 2310FNL 1305FWL 32.131096 N Lat, 103.925285 W Lon		10. Field and Pool or Exploratory Area PURPLE SAGE-WOLFCAMP (GAS)
FEB 14 2019		11. County or Parish, State EDDY COUNTY, NM

12. CHECK THE 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"/> Hydraulic Fracturing <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 Drilling Operations
	<input 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 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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

SPUD DATE: 10/31/2018

10/31/2018 TO 11/03/2018

Spud well. Drill 17 1/2 inch hole, TD at 833 ft. Run 13 3/8 inch, 54.5#, J-55 casing set at 883 ft. Cement casing with 755 sxs Class C cmt. Bump plug. No returns. WOC. Ran Temp Survey, TOC 200?. Pump top job with 200 sxs Neat cmt., no success. WOC. Pump top job 88 sxs Neat cmt. Cmt to surface. WOC, Test csg 1500 psi, 30 mins (good).

11/03/2018 TO 11/08/2018

Drill 12 1/4 inch hole, TD at 3500 ft. Run 9 5/8 inch, 40#, L-80 casing set at 3500 ft. DV tool set @ 999 ft. Cement casing with 1910 sxs Class C/H cmt. Bump plug. Full returns throughout job. Circ cmt to surface. Drop cancelation plug. WOC, Test csg 1500 psi, 30 mins (good).

Accepted For Record
NMOCD
2-20-19INTERED
2-20-19

14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #453574 verified by the BLM Well Information System For BOPCO LP, sent to the Carlsbad Committed to AFMSS for processing by PRISCILLA PEREZ on 02/07/2019 (19PP1001SE)	
Name (Printed/Typed) CHERYL ROWELL	Title REGULATORY COORDINATOR
Signature (Electronic Submission)	Date 02/06/2019

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____	Date _____
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 _____ /s/ Jonathon Shepard	

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)

** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED **