Office	e of New Mexico	Form C-103
<u>District I</u> Energy, Mine	erals and Natural Resources	October 13, 2009 WELL API NO.
1625 N French Dr., Hobbs, NM 88240 District II	PRIJATIONI DILIIGIONI	30-015-32705
District III 1220 S	ERVATION DIVISION outh St. Francis Dr.	5. Indicate Type of Lease  STATE FEE X
1000 Dec Decree D.J. Astro. \$151.07110	ta Fe, NM 87505	STATE FEE X
1220 S St Francis Dt Santa Fe, NM 87505		
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL, OR TO DELPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH		7. Lease Name or Unit Agreement Name Juneau 31 Fee Com
PROPOSALS)  1. Type of Well Oil Well  Gas Well Other		8. Well Number 1
2 Name of Operator BOPCO, L.P		9. OGRID Number 260737
		10 Pool name or Wildcat
3. Address of Operator P O Box 2760 Midland, TX 79702		Carlsbad E (Delaware)
4. Well Location		
Unit Letter L 1980 feet from the South line and 660 feet from the West line		
Section 31 Township 21S Range 28E NMPM CountyEddy  11, Elevation (Show whether DR, RKB, RT, GR, etc.)		
3116' GR		
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		
		<del></del>
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB DOWNHOLE COMMINGLE		
BOWH TOLL COMMINTOLL		
OTHER: Zone abandon Bone Spring & recomplete to Delaware 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.		
BOPCO, L.P. respectfully requests permission to abandon the Bone Spring and recomplete to the Delaware in the wellbore as follows:		
Current perfs located at 7,824'-7,834' Set CIBP at 7,784' and dump 35' cmt on top of plug Perforate 5,578'-5,608' in the Delaware and frac treat the zone. Place on production.		
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Spud Date: 09/26/2009	Rig Release Date: 09/29/200	09
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I hereby certify that the information above is true and complete to the best of my knowledge and belief		
SIGNATURE Paleno Truge	TITLE Regulatory Clerk	DATE 05/24/2010
Type or print name Valerie Truax	E-mail address: vitruax@bass	pet com PHONE. (432)683-2277
For State Use Only		
APPROVED BY Dewro Relate Dist B Sysewish DATE 08/23/2010 Conditions of Approval (if any):		

