

State of New Mexico
Energy, Minerals and Natural ResourcesOIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Office
District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II - (575) 748-1283
811 S. First St., Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM
87505

WELL API NO. 30-015-34212

5. Indicate Type of Lease

STATE ☐ FEDERAL ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name
EAST SHUGART DELWARE UNIT

8. Well Number # 025

9. OGRID Number 329487

10. Pool name or Wildcat
SHUGARTS; DELWARE, EAST

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well ☐ INJECTION ☒

2. Name of Operator BXP OPERATING LLC

3. Address of Operator
1515 WEST CALLE SUR SUITE 174, NM 88240

4. Well Location

Unit Letter A : 250 feet from the NORTH line and 1125 feet from the EAST line
Section 24 Township 18S Range 31E NMPM County EDDY11. Elevation (Show whether DR, RKB, RT, GR, etc.)
GL 3716'

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐
CLOSED-LOOP SYSTEM ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐
OTHER: 5 YR MIT TEST ☒

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

05/05/2023 PERFORMED 5 YR MIT TEST

START: 540#

END : 545#

32 MIN TEST

PASSED MIT TEST

Spud Date:

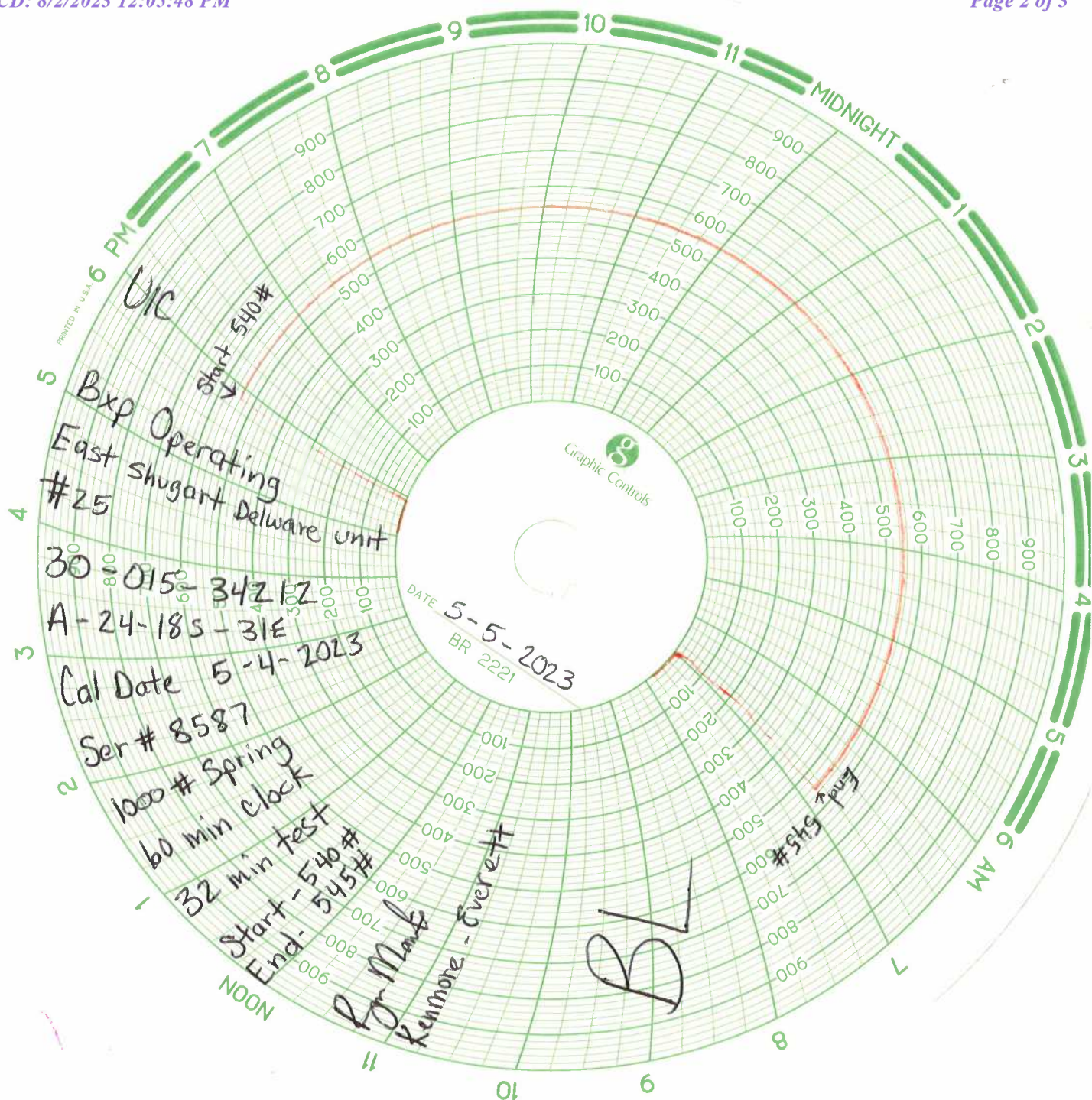
Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE [Signature] TITLE AGENT DATE 5-5-23
Type or print name RYAN MARTIN E-mail address: MYMERCH@PENROCOIL.COM PHONE: 575-492-1236**For State Use Only**

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any): _____



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CONDITIONS

Action 247095

CONDITIONS

Operator: BXP Operating, LLC 11757 KATY FREEWAY HOUSTON, TX 77079	OGRID: 329487
	Action Number: 247095
	Action Type: [C-103] Sub. General Sundry (C-103Z)

CONDITIONS

Created By	Condition	Condition Date
gcordero	None	10/4/2023