Form 3160-5 (March 2012)

(Instructions on page 2)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED OMB No 1004-0137 Expires October 31, 2014

5. Lease Serial No. NMLC068905

6. If Indian, Allottee or Tribe Name

SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other instructions on page 2				7. If Unit of CA/Agreement, Name and/or No.	
1. Type of Well				NMNM71016X	
X Oil Well Gas Well Other				8. Well Name and No. Poker Lake Un	nit 328H
2 Name of Operator BOPCO, L.P.				9. API Well No. 30-015-39293	
3a Address	3b. Phone No. (include area code) 10. Field		10. Field and Pool or E	Exploratory Area	
P O Box 2760 Midland Tx	(432)683-2277 Poker Lake, NW (Delaware)				
4. Location of Well (Footage, Sec., T. UL L; NWNE; 2400 FSL;	\$ 30E		11. County or Parish, S	State	
			···	Eddy	NM
12. CHEC	CK THE APPROPRIATE BO	X(ES) TO INDICATE NAT	URE OF NOTIO	CE, REPORT OR OTHE	ER DATA
TYPE OF SUBMISSION	TYPE OF ACTION				
Notice of Intent	Acıdize	Acidize Deepen X Pro		uction (Start/Resume)	Water Shut-Off
	Alter Casing	Fracture Treat	Recl	amation	Well Integrity
X Subsequent Report	Casing Repair	New Construction	Reco	mplete	X Other Initial
	Change Plans	Change Plans		porarily Abandon	Completion
Final Abandonment Notice	Convert to Injection	Plug Back	Wate	r Disposal	
testing has been completed. Final determined that the site is ready for BOPCO, L.P. respectfully solve and 4/9 thru 4-8-12: Clean and 4/9 thru 4-10-12: Frac stag 4-11 thru 4-18-12: Drill out tubing and Wood Group T 4-19-12: Ready to product 4-26-12: First day of product 4-26-	r final inspection) wishes to report the ir d level location. Set the set 1-19. t balls and seats, flow D 1750 pump. End or e. action. Sec. 2, 24S, 30E; Lat	ritial completion of this frac and flow tanks. For back and circulate his fubing 7245'. N32.144430, Long Ward RECEN	s wellbore. Frac planner ole clean. F	d for 4-9-12. RIH w/2-7/8" EUE	
NMOCE 14 I hereby certify that the foregoing is t Sandra J. Belt ext. 737	rue and correct Name (Printed	NMOCD AR	TESIA		
Sandra J. Belt ext. 737	9 .	Title Sr. 1	tegulát óry (Clerk	
Signature Sarali	a J Belt	Date 06/0			
	THIS SPACE	FOR FEDERAL OR	STATE OFF	ICE USE	
Approved by					The state of the s
		 Fitle		n	nto
Conditions of approval, if any, are attached that the applicant holds legal or equitable tentitle the applicant to conduct operations	itle to those rights in the subjecthereon	not warrant or certify t lease which would Office			ate
Title 18 U.S C Section 1001 and Title 43 fictitious or fraudulent statements or repre			y and willfully to	make to any department	or agency of the United States any false