

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010**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.*5. Lease Serial No.
NMNM02953

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on reverse side.7. If Unit or CA/Agreement, Name and/or No.
891000558X

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other8. Well Name and No.
JAMES RANCH UNIT 148H2. Name of Operator
BOPCO LPContact: COURTNEY LOCKHART
E-Mail: cjlockhart@basspet.com9. API Well No.
30-015-41412-00-X1

3a. Address

MIDLAND, TX 79702

3b. Phone No. (include area code)
Ph: 432-221-730710. Field and Pool, or Exploratory
LOS MEDANOS

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 36 T22S R30E SENE 2455FNL 660FEL

11. County or Parish, and State

EDDY COUNTY, NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input 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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<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
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Drilling Operations
	<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 shall 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 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

This Subsequent Report has been submitted to verify the Multi-Bowl System (MBS) wellhead for the James Ranch Unit #148H has been installed and tested as per BLM COA. Attached is the field report from the wellhead representative as well as the tests and field reports from third party tester.

RECEIVED

SEP 04 2013

NMOCD ARTESIA

Accepted for record
NMOCD 9/4/13
Wade

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #218444 verified by the BLM Well Information System

For BOPCO LP, sent to the Carlsbad

Committed to AFMSS for processing by JOHNNY DICKERSON on 08/29/2013 (13JLD1251SE)

Name (Printed/Typed) CHRISTOPHER VOLEK

Title DRILLING ENGINEER

Signature (Electronic Submission)

Date 08/28/2013

THIS SPACE FOR FEDERAL OR STATE OFFICE USEApproved By **ACCEPTED**JAMES A AMOS
Title SUPERVISOR EPS

Date 09/01/2013

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 Carlsbad

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.

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



FIELD SERVICE ORDER NO.

437711

FIELD SERVICE ORDER

CAM-2303-E

SALES ORDER NO. 3015228	PURCHASE ORDER NO./CONTRACT NO.	P.O. DATE June 22, 2013	LAND <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	DATE PREPARED June 22, 2013	PAGE 1	OF 1
ORDERED BY Borco/Ken White	RIG NAME Latshaw #4	COUNTY Lea	FED. WAT.	FREIGHT	VIA	STATE N.M.

WELL REFERENCE/OCS NO. James Ranch Unit #148H	BILL OF LADING	CARRIER
BILL TO Borco	SOLD TO Borco	SHIP TO Borco

WELLHEAD	SIZE 13 3/8	MAKE MBS	S/N 2253955-01-01 Lower	W.P.	PN
VALVE	SIZES	MODEL	TRIM 2161751-02-03 Upper	W.P.	PN
HANGER	SIZE	TYPE	CSG/TBG SIZE 13 3/8	WEIGHT 48#	GRADE H40

WORK PERFORMED

Drove to Shop, loaded additional BX 160, 13 3/8 O-Ring, 13 3/8 W.O Seal, 13" test plug, w/Running tool-J box. Crossover- IFF Pin X-hole box-A1141/2". Drove to location met with C/M, held JHA. Observed welder cut conductor to bottom of collar, then cut 13 3/8 casing 53" below ground level, landing equipment at 6" below ground level. Top of Hanger as specified by C/M. Observed welder face and bevel casing. Land MBS, leveling and two boring piping valves running N. & S. Observed welded weld 13 3/8. Saw keeping temp 97°F below 250°F. Tested weld to 600 PSI for 10 min. Test failed 13" tall w/B before landing equipment. Loaded tool, drove back to Shop. 13 3/8 Casing cut short placing top at 6" below ground level. C/M is aware.

ITEM	QTY.	DESCRIPTION	PART NO.	UNIT PRICE	DIS-COUNT	TOTAL
1	1	Used Gas Monitor		100.00		100.00
2	1	Test Pump		25.00		25.00
ON 8/8/2016						

F.O.B. MANUFACTURING PLANT

TOTAL PARTS AND MATERIALS

LABOR	FROM: HR & DATE 6 AM 6/22/13	TO: HR & DATE 6 PM 6/22/13	REG. HOURS 12	OT. HOURS	RATE 81.00	OT. RATE	TOTAL 972.00
LODGING	FREIGHT OR MISCELLANEOUS	MEALS	MILEAGE 106 @ 3.25	PER MILE			344.50

PERFORMANCE REVIEW	EXCEEDED EXPECTATIONS	MET EXPECTATIONS	NEEDS IMPROVEMENT	DID NOT MEET EXPECTATIONS	EST. CHARGES	TOTAL CHARGES
Serviceman Arrived at Location On Time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Serviceman's Attitude	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	JOB TYPE
Serviceman's Competency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Drilling <input checked="" type="checkbox"/>
Service Facility Office Support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section (A) (B) C, (circle one)
Did Serviceman Properly Review CAM issued JHA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	System MBS (fill in MBS TSW SS etc.)
OTHER (PLEASE LIST)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hanger IC S Man. (circle one)

CUSTOMER STAMP	RIG DELAY RESULTING FROM CAMERON SERVICE OR EQUIPMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES PLEASE GIVE YOUR COMMENTS:	Completion/Decompletion <input type="checkbox"/>
WELL NAME James Ranch Unit 148H		Frac tree <input type="checkbox"/>
AFE # IRU #148H		Prod. Tree <input type="checkbox"/>
COST CODE 4130		Lubricator <input type="checkbox"/>
DATE 6/22/13		Production <input type="checkbox"/>
SIGNATURE Ken White		Greasing <input type="checkbox"/>
MAKE SURE PROPER TAX IS ADDED TO EACH INVOICE		Valve / Act. <input type="checkbox"/>
		SD Lubricator <input type="checkbox"/>
		OTHER weld-on
	CAMERON REP. "Print" Scott Lynsky	DATE 6/22/13
	CUSTOMER REP. "Print" Scott Lynsky	DATE

Reviewed by District Mgr.

FPR Submitted

☐ YES☐ NO

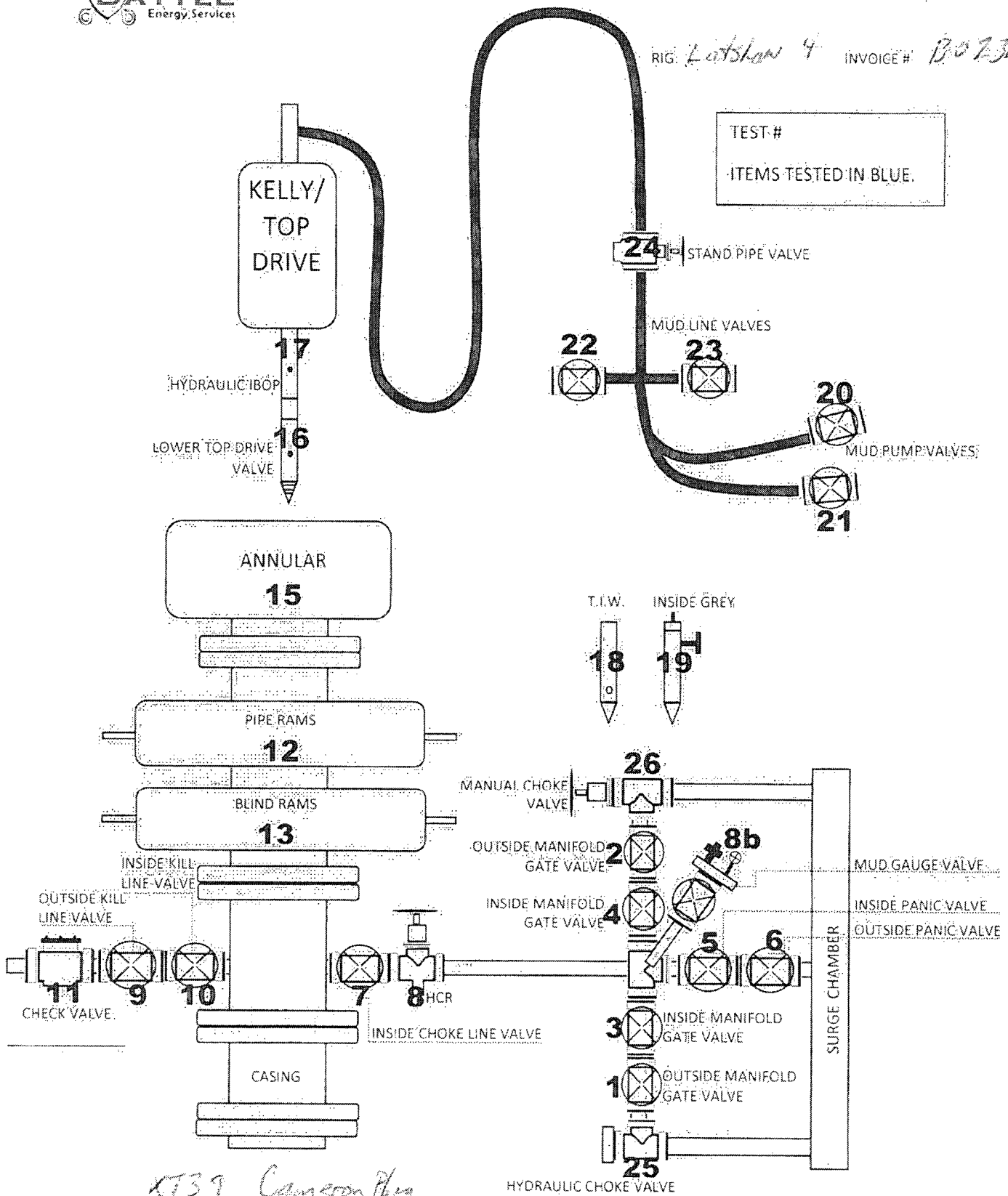
Signature

FPR#

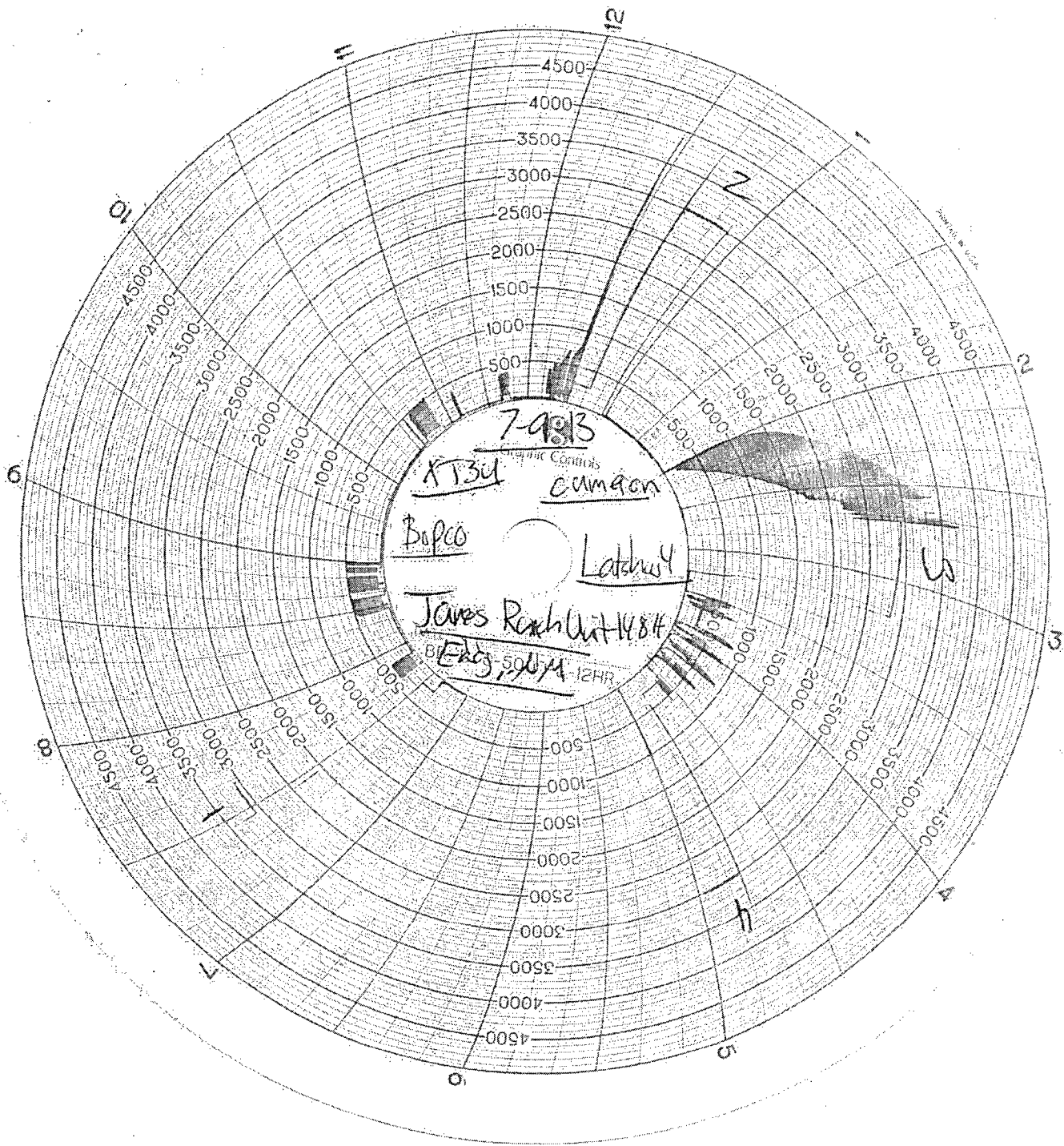
Date

Date

TEST #
ITEMS TESTED IN BLUE.



XT39 Cameron Plug
DRILL PIPE & TYPE
Cameron Speed Band
PLUG/CUP SIZE AND TYPE





PO Box 7
Lovington, NM 88260
(575) 942-9472

Invoice

No B02208

BOP Test

Date 6-23-13 Start time _____ ☐ am ☐ pm
Company Booco State NM County _____
Lease JAMES RANCH Unit 148-H
Company Man _____
Toolpusher _____ Tester JOEL GOMEZ
Drilling Contractor Lafshaw Rig # 4

Test Pressures	
BOP:	<u>3,000</u>
Annular:	<u>2,500</u>
Casing:	<u>1,200</u>
Pumps:	<u>3,000</u>

Test #	Items tested	Low Test		High Test		Remarks
		PSI	Min.	PSI	Min.	
1	Battle test equip.	250	10	3000	10	Tested Battle truck equip
2	13, 10, 26, 25, 6	250	10	3000	10	* Would not pressure up. was worked with
3	13, 10, 2, 6, 1	250	10	3000	10	test items individually. After pressure
4	13, 10, 4, 6, 3	250	10	3000	10	was reached, low bled 100 psi. high
5	12, 9, 8	250	10	3000	10	bled 400 psi.
6	12, 11, 7	250	10	3000	10	* Test 3 - Worked 2, 6, 1. Tested good.
7	15, 11, 7	250	10	2500	10	* test 4 - Worked 3, 4 then disassembled
8	17	250	10	3000	10	5 was bad. would not pressure.
9	24	250	10	3000	10	Closed 6, tested good. 5 will be replaced.
10	20, 21, 22, 23	250	10	3000	10	* test 5 - Worked HCR. Test good. 3, 4, 5, 8, 6
11	18	250	10	3000	10	to be tested after replacement of 5.
12	19	250	10	3000	10	* test 6 - Worked valves. tested good.
13	12, 11, 8, 6, 34, 5	250	10	3000	10	* test 8 - Worked hydraulic 16 in. tested good.
14	26, 2, 25, 6, 2, back of 8	250	10	3000	10	* test 10 - changed rubber on mudline transducer. Good
15	Casing, 15, 8	—	—	1200	10	* test 15 - casing bled 50 psi. 4% in 15 min. (tested thru kill line)
						* Company man advised accumulator not already been tested.

4 HR @ 900 = 900
Mileage 130 @ 1.25 /mile = 130
Methanol _____ = _____
Cup Test _____ = _____
16 @ 120 = 1920
@ # 2950
Subtotal = 162.25
Tax = _____
TOTAL = 3,112.25

Test accepted by: _____

WELL NAME James Ranch Unit 148H
AFE # JRU #148H
COST CODE 1120
DATE 6/23/13
SIGNATURE Ben White

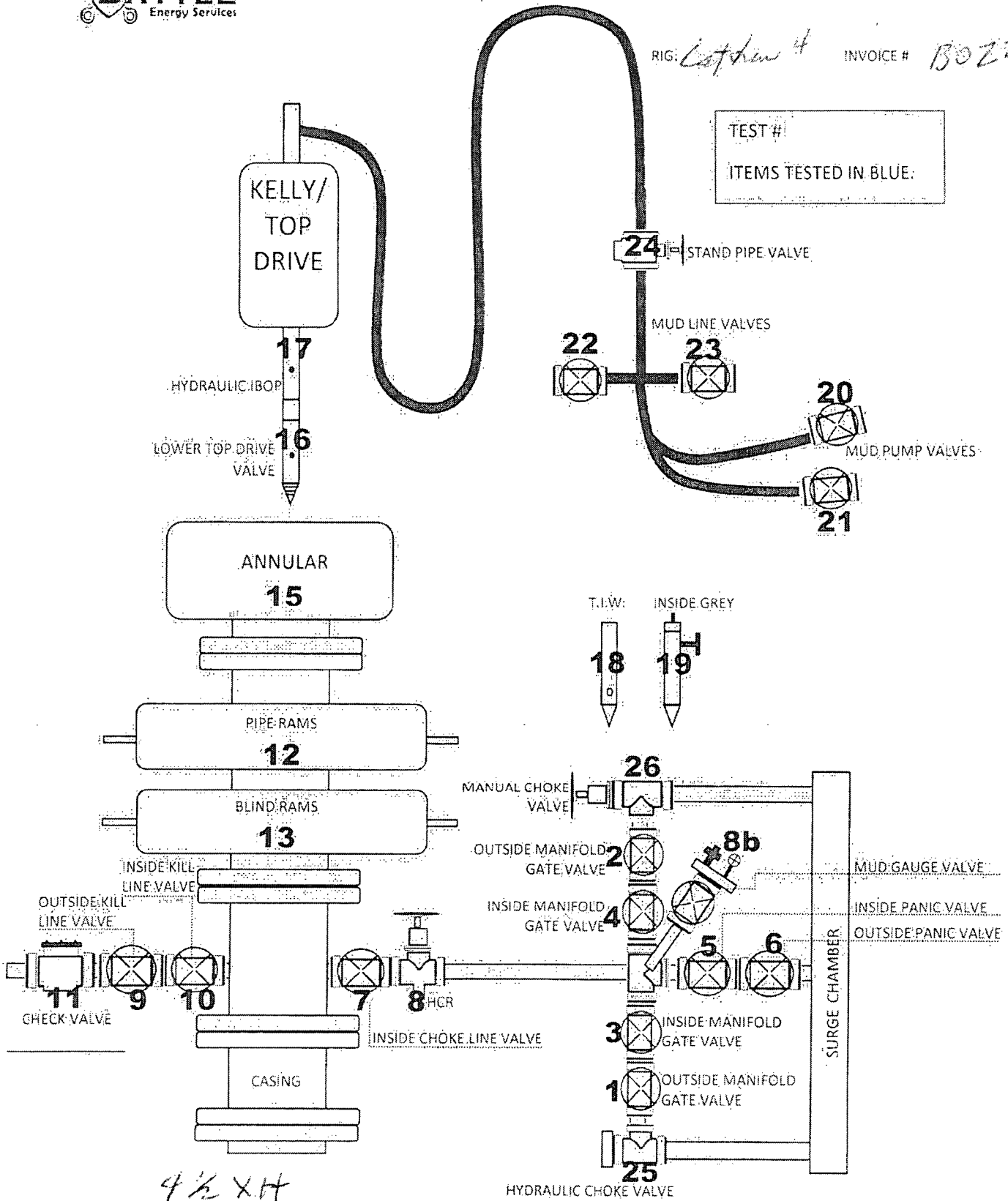
MAKE SURE PROPER TAX
IS ADDED TO EACH INVOICE

RIG: *Cathryn 4*

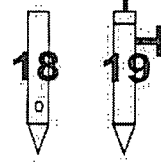
INVOICE # 1302208

TEST #

ITEMS TESTED IN BLUE:



T.I.W: INSIDE GREY



4 1/2 x 11

DRILL PIPE & TYPE

Cameron Speed head
PLUG/CUP SIZE AND TYPE

