

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM-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.  
NMLC061705A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.  
891000303E

8. Well Name and No.  
POKER LAKE UNIT 078

9. API Well No.  
30-015-27536

10. Field and Pool, or Exploratory  
POKER LAKE; DELAWARE SW

11. County or Parish, and State  
EDDY COUNTY, NM

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well  
 Oil Well  Gas Well  Other

2. Name of Operator  
BOPCO LP  
Contact: TRACIE J CHERRY  
E-Mail: tjcherry@basspet.com

3a. Address  
P O BOX 2760  
MIDLAND, TX 79702

3b. Phone No. (include area code)  
Ph: 432-221-7379

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec 25 T24S R30E NENE 660FNL 660FEL

**12. CHECK 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"/> 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	Venting and/or Flaring
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

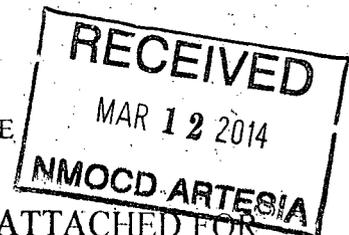
13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths 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 recompletion 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.)

BOPCO, LP respectfully submits this sundry for intent to intermittently flare on the referenced agreement for 90-days. Wells contributing to the flaring volume are as follows:

Lease number/well/API

- NMLC061705B POKER LAKE UNIT 100 30-015-27961-00-S1 ✓
- NMLC061705B POKER LAKE UNIT 103 30-015-27919-00-S1 ✓
- State - E2206 POKER LAKE UNIT 105 30-015-27895-00-S1 ✓
- NMLC061705B POKER LAKE UNIT 106 30-015-27920-00-S1 ✓
- NMNM0157779 POKER LAKE UNIT 108 30-015-28086-00-S1 ✓
- NMNM0157779 POKER LAKE UNIT 111 30-015-28087-00-S1 ✓
- State - B10685 POKER LAKE UNIT 114 30-015-28102-00-S1 ✓

SUBJECT TO LIKE  
APPROVAL BY STATE



SEE ATTACHED FOR  
CONDITIONS OF APPROVAL

WDS 3/13/14

APPROVED FOR RECORD

14. I hereby certify that the foregoing is true and correct.  
**Electronic Submission #220731 verified by the BLM Well Information System.**  
**For BOPCO LP, sent to the Carlsbad**  
**Committed to AFMSS for processing by KURT SIMMONS on 10/21/2013.**

Name (Printed/Typed) TRACIE J CHERRY Title REGULATORY ANALYST

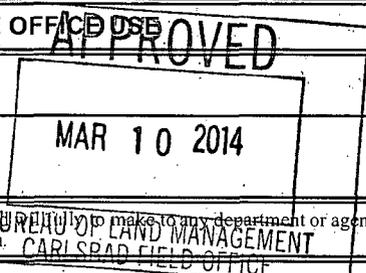
Signature (Electronic Submission) Date 09/20/2013

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By *[Signature]* 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 \_\_\_\_\_



Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly 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.

**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***

BUREAU OF LAND MANAGEMENT  
Carlsbad Field Office  
620 East Greene Street  
Carlsbad, New Mexico 88220  
575-234-5972

3/10/2014 Approved subject to Conditions of Approval. JDB

Condition of Approval to Flare Gas

1. Report all volumes on OGOR reports.
2. Comply with NTL-4A requirements
3. Subject to like approval from NMOCD
4. **Flared volumes will still require payment of royalties**
5. Install gas meter on vent/flare line to measure gas prior to venting/flaring operations if it is not equipped as such at this time. Gas meter to meet all requirements for sale meter as Federal Regulations and Onshore Order #5. Include meter serial number on sundry.
6. This approval does not authorize any additional surface disturbance.
7. Submit updated facility diagram as per Onshore Order #3.
8. Approval not to exceed 90 days for date of approval.
9. Submit Subsequent Report to this sundry with actual volumes of gas flared monthly on 3160-5 (sundry notice).
10. If flaring is still required past 90 days submit new request for approval.
11. If a portable unit is used to flare gas it must be monitored at all times.
12. Comply with any restrictions or regulations when on State or Fee surface.

JDB