

Submit 1 Copy To Appropriate District 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

State of New Mexico  
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103  
Revised July 18, 2013

|                                                                                                                                                                                                             |  |                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------|
| SUNDRY NOTICES AND REPORTS ON WELLS<br>(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.)      |  | WELL API NO.<br>30-015-24355                                                                        |
| 1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>                                                                              |  | 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 2. Name of Operator<br>BOPCO, LP                                                                                                                                                                            |  | 6. State Oil & Gas Lease No.                                                                        |
| 3. Address of Operator<br>PO Box 2760 Midland, TX 79702                                                                                                                                                     |  | 7. Lease Name or Unit Agreement Name<br>New Mexico "O" State COM                                    |
| 4. Well Location<br>Unit Letter <u>G</u> : <u>1980</u> feet from the <u>North</u> line and <u>1980</u> feet from the <u>East</u> line<br>Section <u>12</u> Township <u>19S</u> Range <u>28E</u> NMPM County |  | 8. Well Number 01                                                                                   |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)                                                                                                                                                          |  | 9. OGRID Number<br>260737                                                                           |
|                                                                                                                                                                                                             |  | 10. Pool name or Wildcat<br>Palmillo Wolfcamp, West                                                 |

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

|                                                                     |                                           |                                                  |                                          |
|---------------------------------------------------------------------|-------------------------------------------|--------------------------------------------------|------------------------------------------|
| NOTICE OF INTENTION TO:                                             |                                           | SUBSEQUENT REPORT OF:                            |                                          |
| PERFORM REMEDIAL WORK <input type="checkbox"/>                      | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/>           | ALTERING CASING <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/>                        | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPNS. <input type="checkbox"/> | P AND A <input type="checkbox"/>         |
| PULL OR ALTER CASING <input type="checkbox"/>                       | MULTIPLE COMPL <input type="checkbox"/>   | CASING/CEMENT JOB <input type="checkbox"/>       |                                          |
| DOWNHOLE/COMMINGLE <input type="checkbox"/>                         |                                           |                                                  |                                          |
| CLOSED-LOOP SYSTEM <input type="checkbox"/>                         |                                           |                                                  |                                          |
| OTHER: Plug back and Recomplete <input checked="" type="checkbox"/> |                                           | OTHER: <input type="checkbox"/>                  |                                          |

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, LP submits this sundry notice to recomplate the referenced well to plug back and recomplate in the Bone Spring formation.

1. MIRU pulling unit. ND WH and NU 5K BOP. U nseat pump, POOH with tbq, pump and rods
2. RIH Set CIBP @ +/-9,400' tag plug to verify it is set. T est CIBP to 1,000 psi. Dump bail 35' Class "H" cement (-3.5 sacks) on top of CIBP.
3. RIH set CIBP @ 8,910'. Tag plug to verify it is set. Pressure test CIBP to 3,400 psi
4. Perforate the Bone Spring as follows (Continued on attachment):

| Top Perf | Bottom Perf | SPF | HOLES | PHASING |
|----------|-------------|-----|-------|---------|
| 8,753'   | 8,763'      | 2   | 20    | 120     |

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 Tracie J Cherry TITLE Sr. Regulatory Analyst DATE 05/19/2015  
Type or print name Tracie J Cherry E-mail address: tjcherry@basspet.com PHONE: 432/528-8977  
For State Use Only  
APPROVED BY: R Dade TITLE Director Supervisor DATE 5/19/15  
Conditions of Approval (if any):

NM OIL CONSERVATION

ARTESIA DISTRICT

MAY 19 2015

RECEIVED

5. Set packer@ 8,740' (15' above top perf). Spot 1000 gallons of 15% double inhibited NEFE HCL acid 8,755' to 8,760'. Flush acid with 56 bbls of 2% KCL. PUH with 2-7/8" tubing to set packer@ 8,700'. Swab well.

6. Set RBP at +/- 8,700' (53' above top perf at 8,753'). Perforate the Bone Spring as follows

| Top Perf | Bottom Perf | SPF | HOLES | PHASING |
|----------|-------------|-----|-------|---------|
| 8,380'   | 8,385'      | 2   | 10    | 120     |
| 8,415'   | 8,425'      | 2   | 20    | 120     |

7. RIH w/tbg and pkr @ +/-7,400' Acid stimulate with 1,500 gals of 15% NEFE HCL acid and 30 bio-degradable ball sealers (1.3 SG). Reverse circulate w/2% KCL. PUH w/RBP.

8. Set RBP at +/- 8,330' (50' above top perf). Perforate Bone Spring as follows

| Top Perf | Bottom Perf | SPF | HOLES | PHASING |
|----------|-------------|-----|-------|---------|
| 7,788'   | 7,793'      | 2   | 10    | 120     |
| 7,798'   | 7,808'      | 2   | 20    | 120     |

9. Set packer@ +/-6,760'. Acid stimulate the Bone Spring perforations with 1,000 gals of 15% NEFE HCL acid. Flush acid with 2% KCL. Release pkr.

10. Latch onto and unset RBP. POOH with same on tubing.

11. PU and RIH with 2-7/8" 6.5#, J-55 tubing, pump and rods. Place well on production.

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*provide tbg depth on C105*

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State of New Mexico  
Energy, Minerals & Natural Resources Department  
OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-102  
Revised August 1, 2011  
Submit one copy to appropriate  
District Office

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

|                                         |                                                        |                                                 |
|-----------------------------------------|--------------------------------------------------------|-------------------------------------------------|
| <sup>1</sup> API Number<br>30-015-24355 | <sup>2</sup> Pool Code<br>49550                        | <sup>3</sup> Pool Name<br>Palmillo; Bone Spring |
| <sup>4</sup> Property Code<br>306415    | <sup>5</sup> Property Name<br>New Mexico "O" State COM | <sup>6</sup> Well Number<br>001                 |
| <sup>7</sup> OGRID No.<br>260737        | <sup>8</sup> Operator Name<br>BOPCO, LP                | <sup>9</sup> Elevation<br>3381.7                |

<sup>10</sup> Surface Location

| UL or lot no. | Section | Township | Range | Lot Idn | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| G             | 12      | 19S      | 28E   |         | 1980          | North            | 1980          | East           | Eddy   |

<sup>11</sup> Bottom Hole Location If Different From Surface

| UL or lot no. | Section | Township | Range | Lot Idn | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
|               |         |          |       |         |               |                  |               |                |        |

|                                     |                               |                                  |                         |
|-------------------------------------|-------------------------------|----------------------------------|-------------------------|
| <sup>12</sup> Dedicated Acres<br>40 | <sup>13</sup> Joint or Infill | <sup>14</sup> Consolidation Code | <sup>15</sup> Order No. |
|-------------------------------------|-------------------------------|----------------------------------|-------------------------|

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

|  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|  | <b><sup>17</sup> OPERATOR CERTIFICATION</b><br>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.<br>Signature: <i>Tracie J Cherry</i> Date: 05/19/2015<br>Printed Name: Tracie J Cherry<br>E-mail Address: ticherry@basspet.com |
|  | <b><sup>18</sup> SURVEYOR CERTIFICATION</b><br>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.<br>Date of Survey:<br>Signature and Seal of Professional Surveyor:<br>Certificate Number:                                                                                                                                                                                                                                                                                                                                |
|  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |

extend SE 1/4 NE 1/4  
Sec 1  
Sec 12  
per PK 5-19-15



# Schematic - Vertical Production

BOPCO, L.P. - West Texas

Well Name: NEW MEXICO "O" STATE COMM #01

Well ID: 30-015-24355

Field: Palmillo-wolfcamp 49570

Sect: 12 Town: 19S Rng: 28E Eddy Co. State: New Mexico

Blk Survey:

PROPOSED

## Most Recent Job

| Job Category | Primary Job Type   | Secondary Job Type | Job Start Date | Job End Date |
|--------------|--------------------|--------------------|----------------|--------------|
| Maintenance  | Chemical Treatment |                    | 3/20/2015      | 3/21/2015    |

