District.1
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720
District.11
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720
District.11
1000 Rio Brazos Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170
District.11V
1220 S. St. Francis Dr., Santa Fe, NM 87505

Phone: (505) 476-3460 Fax: (505) 476-3462

NEI OIL CONSERVATION

ARTESIA DISTRISTATE of New Mexico

Energy (Mingg) & Natural Resources Department OIL CONSERVATION DIVISION

RECEIVED South St. Francis Dr. Santa Fe, NM 87505

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

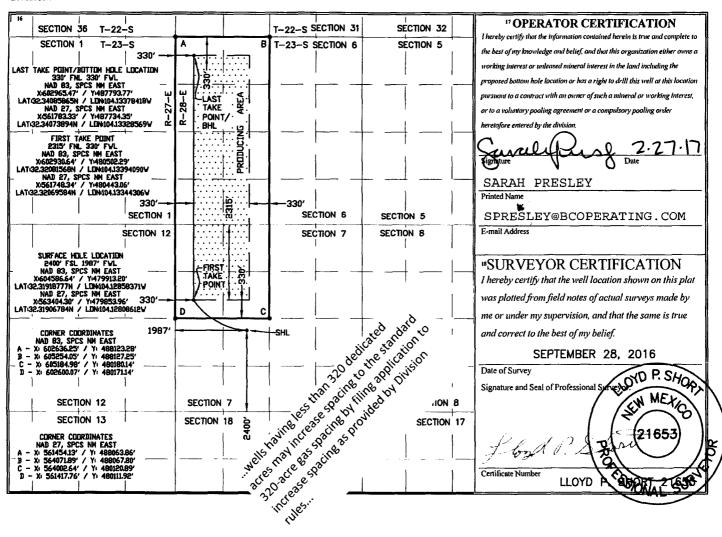


WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number	² Pool Code	² Pool Code ³ Pool Nat 98220 PURPLE SAGE; W	
30-015-43962	98220		
⁴ Property Code	5 Pro	⁵ Property Name	
	MAXIMUS	5 7-6 FEE B1	l 1H
⁷ OGRID №.	⁸ Operator Name		⁹ Elevation
160825	B.C. DPERATING, INC.		3045′

Surface Location Section UL or lot no. Township Range Lot Idn Feet from the North/South line Feet from the East/West line County 2400' 4 7 T23S **R28E** SOUTH 1987 **EDDY** WEST "Bottom Hole Location If Different From Surface UL or lot no. Range Lot Idn Feet from the East/West line Section Township North/South line Feet from the County 6 T23S **R28E** 330' NORTH 330' WEST **EDDY** ¹² Dedicated Acres Joint or Infill 14 Consolidation Code ¹⁵ Order No. 474.24

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.



Submit 1 Copy To Appropriate District Office District I – (575) 393-6161 State of New Mexico Energy, Minerals and Natural Resources	Form C-103 Revised July 18, 2013 WELL API NO.			
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283 811 S. First St. Artesia, NM 88210 OIL CONSERVATION DIVISION	30-015-43962			
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178 1220 South St. Francis Dr.	5. Indicate Type of Lease			
1000 Rio Brazos Rd., Aztec, NM 87410	STATE S FEE			
1220 S. St. Francis Dr., Santa Fe, NM	6. State Oil & Gas Lease No.			
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	7. Lease Name or Unit Agreement Name MAXIMUS 7-6 FEE B1			
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other	8. Well Number 1H			
2. Name of Operator	9. OGRID Number			
BC OPERATING, INC.	160825			
3. Address of Operator P.O. BOX 50820, MIDLAND, TX 79710	10. Pool name or Wildcat FOREHAND RANCH; WOLFCAMP (GAS)			
4. Well Location				
Unit Letter <u>D</u> : 2400 feet from the <u>SOUTH</u> line and <u>1987</u> feet from the <u>WEST</u> line				
Section 7 Township 23S Range 28E	NMPM EDDY County			
11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON COMMENCE DRI TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRI PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT DOWNHOLE COMMINGLE COMPL COMPL CASING/CEMENT	LLING OPNS. P AND A			
OTHER: OTHER:				
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.				
BC OPERATING, INC. RESPECTULLY REQUESTS TO CHANGE THE POOL FOR THE SUBJECT WELL				
FROM: FOREHAND RANCH; WOLFCAMP (GAS)				
TO: PURPLE SAGE; WOLFCAMP (GAS)	MIM OIL DOUSERWATION			
	ARTESIA DISTRICT			
MAR 0 1 2017				
	e de la companya della companya della companya de la companya della companya dell			
	_			
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 SAVALLES TITLE REGULATORY ANALYST DATE 2.27.2017				
Type or print name SARAH PRESLEY E-mail address: SPRESLEY@BCOPERATING.COM PHONE: 432-684-9696				
Accepted For Record				
APPROVED BY: NMOCD TITLE Conditions of Approval (if any):	DATE			