

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED  
OMB NO. 1004-0137  
Expires: January 31, 2018

**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.  
NMLC061672B

6. If Indian, Allottee or Tribe Name

**SUBMIT IN TRIPLICATE - Other instructions on page 2**

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

1. Type of Well  
 Oil Well  Gas Well  Other

8. Well Name and No.  
BIG EDDY UNIT 052  
*Poker Lake Unit*

2. Name of Operator  
BOPCO LP  
Contact: TRACIE J CHERRY  
E-Mail: tracie\_cherry@xtoenergy.com

9. API Well No.  
30-015-24147

3a. Address  
6401 HOLIDAY HILL RD BLDG 5  
MIDLAND, TX 79707

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

10. Field and Pool or Exploratory Area  
PURPLE SAGE;WOLFCAMP(GAS)

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec 33 T25S R31E Mer NMP NENW 660FNL 1980FWL

11. County or Parish, State  
EDDY COUNTY, NM

12. CHECK THE 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"/> Subsequent Report	<input type="checkbox"/> Deepen
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Hydraulic Fracturing
	<input type="checkbox"/> Production (Start/Resume)
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Alter Casing
	<input type="checkbox"/> Reclamation
	<input type="checkbox"/> Well Integrity
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Recomplete
	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans
	<input type="checkbox"/> Temporarily Abandon
	<input type="checkbox"/> Site Facility Diagram/Security Plan
	<input type="checkbox"/> Plug and Abandon
	<input type="checkbox"/> Water Disposal
	<input type="checkbox"/> Convert to Injection
	<input type="checkbox"/> Plug Back

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 must 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 must be filed once testing has been completed. Final Abandonment Notices must 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 site facility diagram for the referenced well.

*SC 4-23-18*  
Accepted for record - NMOCD

RECEIVED

APR 19 2018

DISTRICT II-AR



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

Electronic Submission #410547 verified by the BLM Well Information System  
For BOPCO LP, sent to the Carlsbad  
Committed to AFMSS for processing by DEBORAH MCKINNEY on 04/06/2018 ()

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

Signature (Electronic Submission) Date 04/05/2018

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

Approved By \_\_\_\_\_ 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 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.

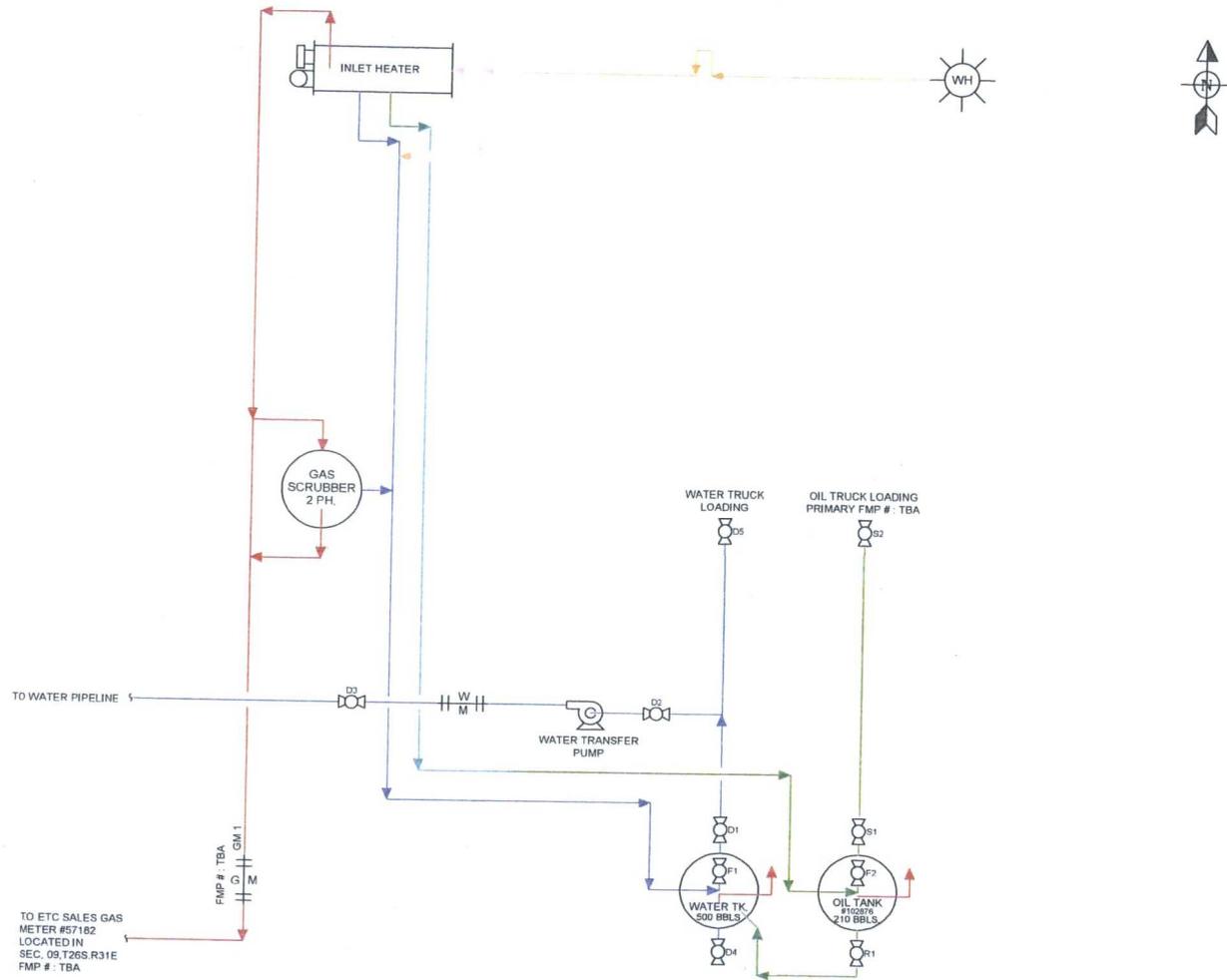
(Instructions on page 2)

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

Valve Phase Details			
Valve ID	Fill	Recycle	Sales/Drain
F1	O/C	S/C	S/C
F2	O/C	S/C	S/C
S1-2	S/C	S/C	O/C
D1-3	S/C	S/C	S/O
D4-5	S/C	S/C	S/C
R1	S/C	O/C	S/C

O=Open, S/O=Sealed Open, C=Closed,  
S/C=Sealed Closed, O/C=Opened or Closed

Tied In Wells	
Name	API #
POKER LAKE UNIT #052	30-015-24147



Facility Gas Usage		DRAWING ID	METER DESCRIPTION	TYPE	METER ID #	PURPOSE
Equipment	Usage	001-1	BATTERY CHECK METER	CLAS	1001524147	CHECK METER
INLET HEATER TREATER	21.43 MCFD					
PNEUMATIC CONTROLLER	144 MCFD					

EMULSION —  
WATER —  
OIL —  
GAS —

Revision	Description of Change	Date	By	BOPCO L.P.
0	ORIGINAL DRAWING	02/20/17	DBR	

**POKER LAKE UNIT #52**  
CENTRAL TANK BATTERY  
EDDY COUNTY, NEW MEXICO  
SEC. 33-T25S-R31E, API #30-015-24147, FED LEASE ID-NMLC061672B  
SITE FACILITY DIAGRAM  
XTO-DB-PLU52-000TB-SFD-000-0039 0