Form 3160-5 (April 2004)

## UNITEDSTATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD Artesia

FO OM Exp	RMAPPRO I B No. 1004 bires: Marc	VED I-0137 ch 31, 200
anna Carial N	T-	

SUNDRY NOTICES AND REPORTS ON WELLS					LC 067144				
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160 - 3 (APD) for such proposals.						, Allottee or Ti	ibe Name		
SUBMIT IN TRIPLICATE - Other instructions on reverse side.					7. If Unit or CA/Agreement, Name and/or No.				
1. Type of Well  X Oil Well	Gas Well Oth	ner			9 Wall No	me and No			
2. NameofOperator					8. Well Name and No.  North Indian Flats 24 Federal #10				
BOPCO, L.P.  3a. Address  3b. Phone No. (include area code)					9. API Well No. 30-015-38196				
3a. Address 3b. Phone No. (include area code) P.O. Box 2760 Midland TX 79702 (432)683-2277					10. Field and Pool, or Exploratory Area				
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)					Indian Flats (Delaware)				
NESW, UL K, 2180' FSL, 1980' FWL, Sec 24, T21S, R28E					11. County or Parish, State  Eddy  NM				
12. CHECK AI	PPROPRIATE BOX(ES	5)TO INDICATE	NATURE OF	NOTICE, RE	PORT, OI	R OTHER DA	ATA		
TYPE OF SUBMISSION									
Notice of Intent  Subsequent Report Final Abandonment Notice	X Acidize								
testing has been completed. Findetermined that the site is read BOPCO, L.P. respectful 11/04/10 Tag PBTD @ surface. TOC @ 1750's emulsifier & iron control 2% KCL. RIH w/ CCI/3-13' (15 shots). Break of stabilizer & gpt surface 11/05/10 Well on produ	y for final inspection.)  Illy wishes to report  3114' FS. Displace  W/ scattered cmt to  ol as additives. Fl  1/"8 csg guns; cut  down perfs w/ 2480  tant. Flush acid w/	ort the initial c wellbore w/ 7 o surface. Pur ush same w/ 9 t short CCI str 0 psi. Pump s	ompletion 70 bbls 2% np 500 gal 13.7 bbls to ip across p pot acid aw	of the wellb KCI. Log we s 7-1/2% HC o spot acid a perf interval	ore as f elbore fi il w/ cor across f & perf l	ollows: rom PBTD rosion inh uture perf Ramsey "6	@ 3110' to ib, non- s. Refill cs 66" sand @	o g w/ ) 2908'-	
•		_1_MCE_TD 2/	NΛ nci ID A	50 pci CD 50	N.nei-on	-W/O-shal	<b>70</b>		
Best test to date 11/11	710. 09 50, 34 54	RECE	VED	po psi, cr s	ACC	EPTED	FOR RI	<b>100</b> R	
		DEC 0 9							
14. I hereby certify that the fore	going is true and correct	NMOCD A	RTESIA		İ	DEC	<b>5</b> 2019	$\overline{}$	
Name (Printed/Typed) Valerie Truax				। ulatory Cler	k	1/	1		
Signature Falerie Smoot		Date 11/23/2010		7	IREAU OF L	AND MANA	<del>'-</del> GEMENT		
	THIS SPACE FA	OR FEDERAL	OR STAT	E OFFICE U	JSE (	JANLOBA	D FIELD OF	105	
Approved by			Title			Date			
Conditions of approval, if any, are certify that the applicant holds leg- which would entitle the applicant	al or equitable title to those	rights in the subject	ant or				71.000	-	
Title 18 U.S.C. Section 1001 and Ti States any false, fictitious or frau	tle 43 U.S.C. Section 1212, dulent statements or repres	make it a crime for ar sentations as to any	y person knowir matter within its	ngly and willfully to s jurisdiction.	o make to ar	ny department o	r agency of the U	Inited	