

UNITED STATES **N.M. OIL CONSERVATION DIVISION**  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT **811 S. FIRST STREET**

FORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010

**SUNDRY NOTICES AND REPORTS ON ~~WELLS~~, NM 88210**  
**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:  
NMNM02862

6. If Indian, Allottee or Tribe Name

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

7. If Unit or CA/Agreement, Name and/or No.  
NMNM71016X

1. Type of Well  
☒ Oil Well ☐ Gas Well ☐ Other

8. Well Name and No.  
PLU BIG SINKS 22 FEDERAL 1H

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

9. API Well No.  
30-015-37838

3a. Address  
P O BOX 2760  
MIDLAND, TX 79702  
3b. Phone No. (include area code)  
Ph: 432-221-7379

10. Field and Pool, or Exploratory  
WS;G-06 S243026M;BONE SPR

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec 25 T24S R30E SWSE 100FSL 2241FEL

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

**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 recompleat 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 recompleat 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 Notice of Intent to intermittently flare for 90-days, July-September 2013.

Wells at this facility:

Well / API  
*Names changed*  
PLU Big Sinks 14 24 30 USA 4H / 30-015-40395-00-S1  
PLU Big Sinks 15 24 30 USA 4H / 30-015-39693-00-S1  
PLU Big Sinks 22 Fed 1H / 30-015-37838-00-S1  
PLU Big Sinks 23 24 30 USA 4H / 30-015-39633-00-S1

*SPD 2/11/15*  
**Accepted for record**  
**NMOC**

**SEE ATTACHED FOR**  
**CONDITIONS OF APPROVAL**  
**NM OIL CONSERVATION**  
ARTESIA DISTRICT  
**FEB 2 2015**

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

**Electronic Submission #233774 verified by the BLM Well Information System**  
**For BOPCO LP, sent to the Carlsbad**  
**Committed to AFMSS for processing by MEIGHAN SALAS on 04/30/2014 ()**

Name (Printed/Typed) TRACIE J CHERRY

Title REGULATORY ANALYST

**RECEIVED**

Signature (Electronic Submission)

Date 01/29/2014

**APPROVED**

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

Approved By

Title

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

**BUREAU OF LAND MANAGEMENT**  
**CARLSBAD FIELD 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.

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

**Additional data for EC transaction #233774 that would not fit on the form**

**32. Additional remarks, continued**

Flaring will be intermittent and is necessary due to restricted pipeline capacity. Estimated 150 MCFD could go to flare depending on pipeline conditions.

Flared volumes will be reported on monthly production reports.

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**PLU CVX JV BS 3H  
30-015-37838  
BOPCO, L.P.  
January 23, 2015  
Conditions of Approval**

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.

**012315 JAM**