

UNITED STATES **NM OIL CONSERVATION**
DEPARTMENT OF THE INTERIOR ARTESIA ~~OSDARTESIA~~
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010**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.*JUN 25 2015
RECEIVED**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM02862
2. Name of Operator BOPCO LP		6. If Indian, Allottee or Tribe Name
Contact: TRACIE J CHERRY E-Mail: tjcherry@basspet.com		7. If Unit or CA/Agreement, Name and/or No. NMNM71016X
3a. Address P O BOX 2760 MIDLAND, TX 79702	3b. Phone No. (include area code) Ph: 432-683-2277	8. Well Name and No. POKER LAKE UNIT 428H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 34 T24S R30E Mer NMP NENW 850FNL 2225FWL		9. API Well No. 30-015-41246
		10. Field and Pool, or Exploratory NASH DRAW;DEL/BS (AV SND)
		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 recompletion 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 2014.

Wells going to this battery are as follows:

POKER LAKE UNIT 300H / 300153695000S1 - NM02862
POKER LAKE UNIT 301H / 300153692400S1 - NM02862
POKER LAKE UNIT 363H / 300154068400S1 -
POKER LAKE UNIT 368H / 300154043600S1 -
POKER LAKE UNIT 364H / 300154080000S1 -
POKER LAKE UNIT 428H / 300154124600S1 -

**SEE ATTACHED FOR
CONDITIONS OF APPROVAL**

Requesting approval to flare 1500 MCFD, depending on pipeline conditions. Flaring will be

**Accepted for record
NM02862**

JDD

7/23/15

14. I hereby certify that the foregoing is true and correct. Electronic Submission #275713 verified by the BLM Well Information System For BOPCO LP, sent to the Carlsbad Committed to AFMSS for processing by DEBORAH HAM on 05/11/2015 ()	
Name (Printed/Typed) TRACIE J CHERRY	Title REGULATORY ANALYST
Signature (Electronic Submission)	Date 11/03/2014
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.	Date
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 #275713 that would not fit on the form

32. Additional remarks, continued

intermittent and is necessary due to restricted pipeline capacity.

Gas production is commingled at the flare to reduce the number flare stacks that would be needed for individual well locations.

Gas volumes will be metered prior to flaring, allocated back to each well and reported on monthly production reports

**Poker Lake Unit 428H
30-015-41246
BOPCO, L.P.
June 22, 2015
Conditions of Approval**

1. Report all volumes on OGOR B as disposition code 08.
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.

JAM 062215