

NM OIL CONSERVATION DIVISION
ARTESIA DISTRICT

FEB 20 2017

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

RECEIVED

WELL API NO.

30-015-42998

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

LACKEY 34 SWD

8. Well Number 1

9. OGRID Number

160825

10. Pool name or Wildcat

SWD; CHERRY CANYON

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 PROPOSALS.)

1. Type of Well: Oil Well ☐ Gas Well ☐ Other SWD

2. Name of Operator

BC OPERATING, INC.

3. Address of Operator

P.O. BOX 50820, MIDLAND, TX 79710

4. Well Location

Unit Letter L : 2480 feet from the SOUTH line and 235 feet from the WEST line
Section 34 Township 23S Range 26E NMPM EDDY County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

3,344'

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐TEMPORARILY ABANDON ☐ CHANGE PLANS ☐PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐DOWNHOLE COMMINGLE ☐CLOSED-LOOP SYSTEM ☐OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐COMMENCE DRILLING OPNS. ☐ P AND A ☐CASING/CEMENT JOB ☐OTHER: SWD ☒

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.

1/26/2017 - RAN MIT TEST. 100 TBG PSI, 500 CSG PSI. RICHARD INGE OF THE NMOC D WITNESSED.

MISSING COMPLETION INFORMATION. PLEASE SUBMIT
BEFORE INJECTION CAN OCCUR. SEE CLOS IN WELL
FILE.

Spud Date: 12/15/2016

Rig Release Date: 12/21/2016

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Sarah Presley TITLE REGULATORY ANALYST DATE 2.20.2017Type or print name SARAH PRESLEY E-mail address: SPRESLEY@BCOPERATING.COM PHONE: (432) 684-9696

For State Use Only

APPROVED BY: RICHARD INGE TITLE COMPLIANCE OFFICER DATE 2/28/17

Conditions of Approval (if any):