

District I 1625 N. French Dr., Hobbs, NM 88240 Phone: (575) 393-6161 Fax: (575) 393-0720 District II 811 S. First St., Artesia, NM 88210 Phone: (575) 748-1283 Fax: (575) 748-9720 District III 1000 Rio Brazos Rd., Aztec, NM 87410 Phone: (505) 334-6178 Fax: (505) 334-6170 District IV 1220 S. St Francis Dr., Santa Fe, NM 87505 Phone: (505) 476-3470 Fax: (505) 476-3462	State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division 1220 S. St Francis Dr. Santa Fe, NM 87505	Form C-103 August 1, 2011 Permit 167483 <hr/> WELL API NUMBER 30-015-40661 <hr/> 5. Indicate Type of Lease S <hr/> 6. State Oil & Gas Lease No. <hr/> 7. Lease Name or Unit Agreement Name PLU BIG SINKS 2 25 30 STATE																				
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: O		8. Well Number 002H																				
2. Name of Operator BOPCO, L.P.		9. OGRID Number, 260737																				
3. Address of Operator 6 Desta Drive Ste 3700, P. O. Box 2760, Midland, TX 79702		10. Pool name or Wildcat																				
4. Well Location Unit Letter <u>P</u> : <u>75</u> feet from the <u>S</u> line and feet <u>220</u> from the <u>E</u> line Section <u>2</u> Township <u>25S</u> Range <u>30E</u> NMPM County <u>Eddy</u>																						
11. Elevation (Show whether DR, KB, BT, GR, etc.) 3353 GR																						
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit Type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____																						
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data <table style="width: 100%;"> <tr> <td colspan="2">NOTICE OF INTENTION TO:</td> <td colspan="2">SUBSEQUENT REPORT OF:</td> </tr> <tr> <td>PERFORM REMEDIAL WORK <input type="checkbox"/></td> <td>PLUG AND ABANDON <input type="checkbox"/></td> <td>REMEDIAL WORK <input type="checkbox"/></td> <td>ALTER CASING <input type="checkbox"/></td> </tr> <tr> <td>TEMPORARILY ABANDON <input type="checkbox"/></td> <td>CHANGE OF PLANS <input type="checkbox"/></td> <td>COMMENCE DRILLING OPNS. <input type="checkbox"/></td> <td>PLUG AND ABANDON <input type="checkbox"/></td> </tr> <tr> <td>PULL OR ALTER CASING <input type="checkbox"/></td> <td>MULTIPLE COMPL <input type="checkbox"/></td> <td>CASING/CEMENT JOB <input type="checkbox"/></td> <td></td> </tr> <tr> <td colspan="2">Other: _____</td> <td colspan="2">Other: <u>Perforations/Tubing</u> <input checked="" type="checkbox"/></td> </tr> </table>			NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:		PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTER CASING <input type="checkbox"/>	TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE OF PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>		Other: _____		Other: <u>Perforations/Tubing</u> <input checked="" type="checkbox"/>	
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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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.																						
Perforations Pool: CORRAL CANYON; DELAWARE, NORTHEAST, 96209 Location: A -2-25S-30E 65 N 580 W																						
TOP 9747	BOT 13989	Open Hole N																				
Shots/ft 6	Shot Size 0.42	Material Sand/Water																				
Stimulation Frac	Amount																					
Tubing CORRAL CANYON; DELAWARE, NORTHEAST, 96209																						
Tubing Size 2.88	Type L80	Depth Set 6510																				
Packer Set																						
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOC guidelines <input type="checkbox"/> , a general permit <input type="checkbox"/> or an (attached) alternative OCD-approved plan <input type="checkbox"/> .																						
SIGNATURE _____ Type or print name <u>TRACIE J CHERRY</u>		TITLE _____ E-mail address <u>TJCherry@BassPet.com</u>																				
DATE <u>6/10/2013</u>		Telephone No. <u>432-683-2277</u>																				
For State Use Only																						
APPROVED BY: <u>[Signature]</u>		TITLE <u>Dist II Supervisor</u>																				
DATE <u>5/20/14</u>																						

