

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

DEC 10 2008

FORM APPROVED
OMB No. 1004-0137
Expires: March 31, 2007

OCD-ARTESIA

Lease Serial No.

NM-069219

6. If Indian, Allottee or Tribe Name

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.

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well
☐ Oil Well ☒ Gas Well ☐ Other2. Name of Operator
BEPCO, L.P.3a. Address
P.O. BOX 2760 MIDLAND TX 79702-27603b. Phone No. (include area code)
(432)683-22774. Location of Well (Footage, Sec., T., R., M., or Survey Description)
SEC 26, T21S, R28E, UL B. 1980 FEL, 1660' FNL7. If Unit or CA/Agreement, Name and/or No.
NMNM68294X8. Well Name and No.
BIG EDDY UNIT #709. API Well No.
30-015-2347310. Field and Pool, or Exploratory Area
INDIAN FLATS (STRAWN), WEST11. County or Parish, State
EDDY
NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|---|---|---|--|--|
| <input 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 checked="" 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 type="checkbox"/> Other Amend P&A |
| | <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | procedure to |
| | <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back | <input type="checkbox"/> Water Disposal | include tests |

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.)

BEPCO, L. P. respectfully requests that the well name, for the subject wellbore, be changed from the Big Eddy #70, property code 1775, to Big Eddy Unit #70, property code 1776. The wellbore will be coming back into the unit as it returns to production in the Strawn.

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

ANN MOORE

Title SENIOR PRODUCTION CLERK

Signature



Date 12/08/2008

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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

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.

(Instructions on page 2)

Accepted for record - NMOCD

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT



WELL COMPLETION OR RECOMPLETION REPORT AND LOG

FORM APPROVED
OMB NO. 1004-0137
Expires: March 31, 2007

1a. Type of Well ☐ Oil Well ☒ Gas Well ☐ Dry ☐ Other
b. Type of Completion ☐ New Well ☐ Work Over ☐ Deepen ☒ Plug Back ☐ Diff. Resrvr.,
Other _____

2. Name of Operator
BEPCO, L.P.

3. Address
P.O. BOX 2760 MIDLAND TX 79702-2760

3.a. Phone No. (Include area code)
(432)683-2277

4. Location of Well (Report location clearly and in accordance with Federal requirements)*

At Surface UL B, 1980' FEL, 1660' FNL

At top prod. interval reported below SAME

At total depth SAME

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14. Date Spudded
11/06/1220

15. Date T.D. Reached
11/22/2008

16. Date Completed
☐ D & A ☒ Ready to Prod.
11/22/2008

18. Total Depth: MD 12635'
TVD

19. Plug Back T.D.: MD 11484'
TVD

20. Depth Bridge Plug Set: MD 11484' Cmt
TVD Plug

21. Type of Electric & Other Mechanical Logs Run (Submit copy of each)

22. Was well cored? ☒ No ☐ Yes (Submit analysis)
Was DST run? ☒ No ☐ Yes (Submit analysis)
Directional Survey? ☒ No ☐ Yes (Submit copy)

23. Casing and Liner Record (Report all strings set in well)

| Hole Size | Size/Grade | Wt (#/ft.) | Top (MD) | Bottom (MD) | Stage Cementer Depth | No. of Sks. & Type of Cement | Slurry Vol. (BBL) | Cement Top* | Amount Pulled |
|-----------|------------|------------|----------|-------------|----------------------|------------------------------|-------------------|-------------|---------------|
| 15" | 11-3/4" | 42# | 0' | 400 | | 450 SXS | | SURF. CIRC | |
| 11" | 8-5/8" | 28# | 0' | 2600 | | 1315 SXS | | SURFACE | |
| 7-7/8" | 5-1/2" | 17# | 0' | 12635' | | 1000 SXS | | CIRC | |
| | | | | | | | | 7740 CALC | |

24. Tubing Record

| Size | Depth Set (MD) | Packer Depth (MD) | Size | Depth Set (MD) | Packer Depth (MD) | Size | Depth Set (MD) | Packer Depth (MD) |
|--------|----------------|-------------------|------|----------------|-------------------|------|----------------|-------------------|
| 2-3/8" | 11,950 PKR | 11,950 | | | | | | |

25. Producing Intervals

26. Perforation Record

| Formation | Top | Bottom | Perforated Interval | Size | No. Holes | Perf. Status |
|-----------|--------|--------|---------------------|-------|-----------|--------------|
| A) STRAWN | 10803' | 11237 | 11008-20' | 0.380 | 72 | Producing |
| B) | | | | | | |
| C) | | | | | | |
| D) | | | | | | |

27. Acid, Fracture, Treatment, Cement Squeeze, Etc.

| Depth Interval | Amount and Type of Material |
|----------------|---|
| 11008-20' | PERF'D W/ 6 JSPF OR 72 HOLES. ACID/Frac 3000 GALS 15% NEFE HCL @ 5000 PSI |
| 11098-398' | SPOT 33 SXS CLASS H PLUG OVER SQZ'D ATOKA PERFS FROM 11426-11525' |
| 11484-11845' | SPOT CMT PLUG W/ 40 SXS CLASS H OVER PREVIOUSLY SET CIBP @ 11877' |

28. Production - Interval A

| Date First Produced | Test Date | Hours Tested | Test Production | Oil BBL | Gas MCF | Water BBL | Oil Gravity Corr. API | Gas Gravity | Production Method |
|---------------------|---------------------|--------------|-----------------|---------|---------|-----------|-----------------------|-------------|-------------------|
| 11/22/08 | 12/02/08 | 24 | → | 0 | 283 | 3 | | | FLOWING |
| Choke Size | Tbg. Press. Flwg SI | Csg. Press. | 24 Hr Rate | Oil BBL | Gas MCF | Water BBL | Gas Oil Ratio | Well Status | |
| 25/64' | 380 | 50 | → | | | | | PRODUCING | |

Production - Interval B

| Date First Produced | Test Date | Hours Tested | Test Production | Oil BBL | Gas MCF | Water BBL | Oil Gravity Corr. API | Gas Gravity | Production Method |
|---------------------|---------------------|--------------|-----------------|---------|---------|-----------|-----------------------|-------------|-------------------|
| | | | → | | | | | | |
| Choke Size | Tbg. Press. Flwg SI | Csg. Press. | 24 Hr Rate | Oil BBL | Gas MCF | Water BBL | Gas Oil Ratio | Well Status | |
| | | | → | | | | | | |

| | | | | | | | | |
|------------|----------------------|-------------|-------------|---------|---------|-----------|-----------------|-------------|
| Produced | Date | Tested | Production | BBL | MCF | BBL | Gas : Oil Ratio | Well Status |
| Choke Size | Tbg. Press. Flwg. SI | Csg. Press. | 24 Hr. Rate | Oil BBL | Gas MCF | Water BBL | Gas : Oil Ratio | Well Status |

28c. Production - Interval D

| | | | | | | | | | |
|---------------------|----------------------|--------------|-----------------|---------|---------|-----------|----------------------|-------------|-------------------|
| Date First Produced | Test Date | Hours Tested | Test Production | Oil BBL | Gas MCF | Water BBL | Oil Gravity Corr API | Gas Gravity | Production Method |
| Choke Size | Tbg. Press. Flwg. SI | Csg. Press. | 24 Hr. Rate | Oil BBL | Gas MCF | Water BBL | Gas : Oil Ratio | Well Status | |

29. Disposition of Gas (Sold, used for fuel, vented, etc.)

SOLD

30. Summary of Porous Zones (Include Aquifers):

Show all important zones or porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

31. Formation (Log) Markers

| Formation | Top | Bottom | Descriptions, Contents, etc. | Name | Top |
|-----------|-----|--------|------------------------------|-----------------------|------------|
| | | | | | Meas Depth |
| | | | | T/DELAWARE MTN. GROUP | 3760' |
| | | | | T/BONE SPRING LIME | 6238' |
| | | | | T/WOLFCAMP | 9638' |
| | | | | T/STRAWN | 10803' |
| | | | | T/ATOKA | 11238' |
| | | | | T/MORROW | 11828' |

32. Additional remarks (include plugging procedure)

33. Indicate which items have been attached by placing a check in the appropriate boxes:

- ☐ Electrical/Mechanical Logs (1 full set req'd)
 ☐ Geological Report
 ☐ DST Report
 ☐ Directional Survey
 ☐ Sundry Notice for plugging and cement verification
 ☐ Core Analysis
 ☐ Other

34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions)*

Name (please print) ANN MOORE

Title SENIOR PRODUCTION CLERK

Signature

Ann Moore

Date 12/08/2008

Title 18 U.S.C. Section 101 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 and false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

**NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT**

Form C-102
Supersedes C-128
Effective 1-1-85

All distances must be from the outer boundaries of the Section.

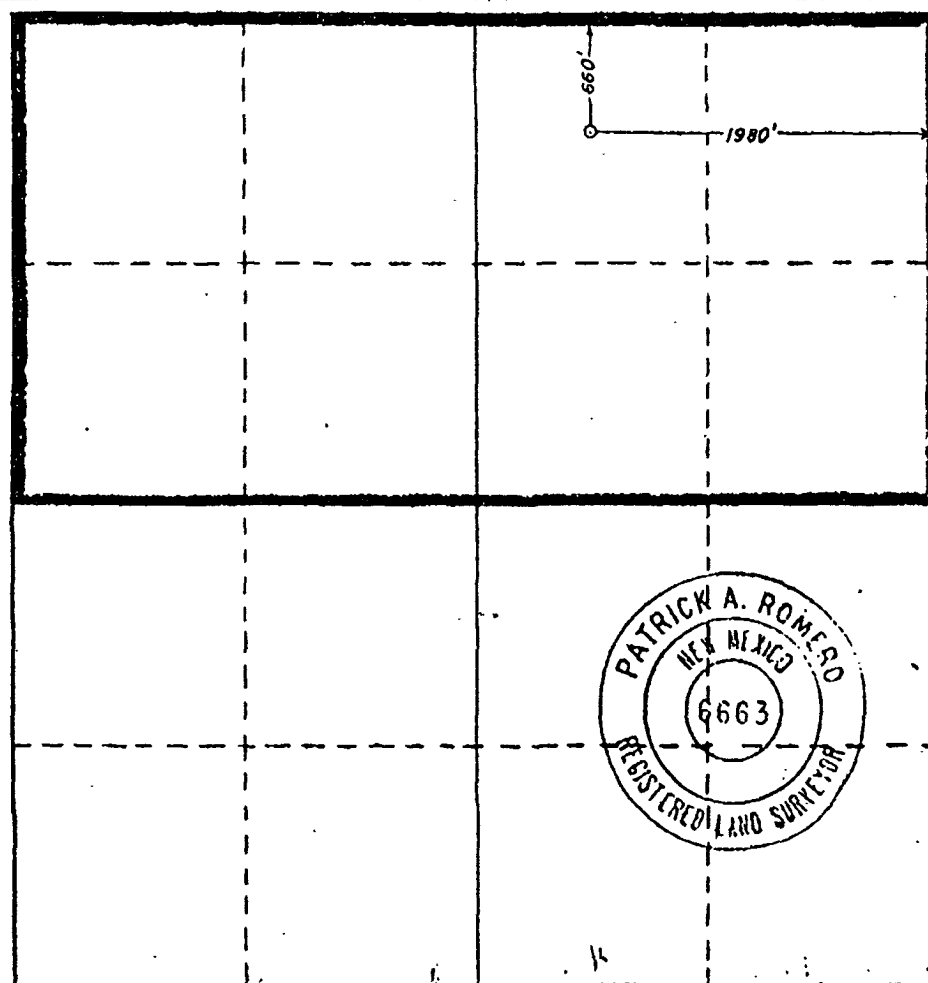
| | | | | | | |
|--|--------------------------------------|-----------------------------|---|-------------------------------|--|-----------------------|
| Operator BEPCO, L. P. | | API# 30-015-23473 | | Lease BIG EDDY UNIT | | Well No. 70 |
| Unit Letter B | Section 26 | Township 21 SOUTH | Range 28 EAST | County EDDY | | |
| Actual Footage Location of Wells <div style="display: flex; justify-content: space-between; align-items: center;"> 660 feet from the NORTH line and 1980 feet from the EAST line </div> | | | | | | |
| Ground Level Elev. 3218.6 | Producing Formation Strawn | | Pool INDIAN FLATS, West (79110) | | Dedicated Acreage: 320 Acres | |

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☒ Yes ☐ No If answer is "yes," type of consolidation Unit

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

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

Troy L. Bevers

Name
Troy L. Bevers

Position
Engineering Assistant

Company
Bass Enterprises Production

Date
February 26, 1988

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed
JULY 22, 1980

Registered Professional Engineer and/or Land Surveyor

Patrick A. Romero

Certificate No. **JOHN W. WEST 878**
PATRICK A. ROMERO 8663
Ronald J. Eldon 3239

