

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

APR 15 2009

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

RM

## 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.

5. Lease Serial No

NMLC069142A

6. If Indian, Allottee or Tribe Name

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

NMNM68294

8. Well Name and No.

BIG EDDY UNIT #154

9. API Well No.

30-015-34399

10. Field and Pool, or Exploratory Area

DUBLIN RANCH (ATOKA)

11. County or Parish, State

EDDY

NM

1. Type of Well

☐

Oil Well

☒

Gas Well

☐

Other

2. Name of Operator

BOPCO, L.P.

3a. Address

P.O. Box 2760 Midland TX 79702

3b. Phone No (include area code)

(432)683-2277

4. Location of Well (Footage, Sec, T, R, M, or Survey Description)

UL A, 660' FNL, 660' FEL, SEC. 15, T22S, R28E

## 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 checked="" type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other TEMPORARILY
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	ZONE ABAND.
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	MORROW

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 wishes to report the addition of perfs in the wellbore as follows:

01/22/2009 MIRU Lucky Well Service. Cut short CCL stripe across pkr & BHA @ 12100' FS. POOH w/ tools, PU Owens premium 10-K CIBP & RIH w/ tools, set same in middle of bottom tbg sub @ 12114' FS. POOH w/ tools.  
01/23/2009 RU BWWC & RIH w/ 2nd Owens CIBP w/ CCL. Tag 1st BP @ 12114' FS. PU 4' & set 2nd BP in bottom of N-80 tbg sub. POOH w/ tools. RD BWWC. Release tbg from seal assembly & POOH w/ same.  
01/24/2009 Tag pkr @ 12100', RU Basic to tbg & displ same w/ 50 bbls 2% KCl. PU & RIH w/ swab, made 11 runs to recover 38 bbls water w/ last FL @ 10000'.  
01/27/2009 RDPU. Shut down.  
03/06/2009 PU seal assembly, tbg subs, 10K magnum double disk assembly & Baker Model D perm pkr. RIH w/ prod tbg, secure seal assembly in model D pkr @ 12100'. RDPT & POOH.  
03/07/2009 POOH w/ remainder of prod tbg. Cut short CCL strip & perf Atoka @ 11496'-11674', 99 shots. POOH w/ gun. PU Baker Hornet 10K packer, tbg subs, F nipple, & magnum double glass disk w/ WEG & RIH w/ CCI, set pkr @ 11400' w/ EOT @ 11425'. POOH w/ tools.  
03/11/2009 RDPU. Returned well to production.  
03/18/2009 Well test pumping 0 BO, 0 BW, 1163 MCF, TP 4900 psi, LP 320 psi, CP 0 psi on 8.5/64" choke.

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

Name (Printed/Typed)

Valerie Truax

Title Regulatory Admin Assistant

Signature

Date 03/24/2009

## THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

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.

Title

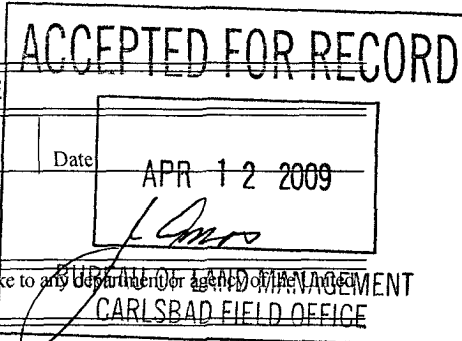
Office

Date

APR 12 2009

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)



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