

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

JUL 21 2009

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

Lm

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
BOPCO, L.P.3a. Address
P.O. Box 2760 Midland TX 797023b. Phone No. (include area code)
(432)683-22774 Location of Well (Footage, Sec, T, R, M, or Survey Description)
UL O, 360' FSL, 2310' FEL, SEC. 12, T24S, R29E5 Lease Serial No
NMNM 05912

6 If Indian, Allottee or Tribe Name

7 If Unit or CA/Agreement, Name and/or No
NMNM 71016X8 Well Name and No
POKER LAKE UNIT #2749 API Well No
30-015-3513810 Field and Pool, or Exploratory Area
NASH DRAW (DELAWARE/BS/AVAL)11. 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 checked="" type="checkbox"/> Other Drilled out |
| | <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | CIBP to |
| | <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back | <input type="checkbox"/> Water Disposal | commingle |

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 drilling out CIBP to this wellbore as follows:

06/30/09 MIRU Lucky Well Service.

07/02/09 RIH w/ tbg washing & drilling sand to CIBP @ 7010' FS. Mill on CIBP for 4 hrs w/ no progress. POOH w/ prod tbg.

07/03/09 Drill on BP for an additional 6 hrs recovering metal & rubber @ returns (possibly failed CIBP @ 7050' pushed up to 2nd BP @ 7010'), drilled 14' total.

07/07/09 Drill on same for 3 hrs to fall free. Tag 2nd CIBP @ 7050' FS; drill on same for 1.5 hrs to fall free. Clean up returns.

07/08-09/09 Replace PS & drill fill to 8488' FS to have packing fail on 2nd PS. Clean up returns & shut down for 3 hrs attempting to repairing same w/ no success. POOH w/ tbg to land EOT above top perf @ 6453' FS. RIH w/ prod tbg to land EOT @ 8565' FS.

07/10/09 Land TAC w/ 17,000#. RDPU. Clean WH & location. Return well to production in all Bone Spring & Delaware perms.

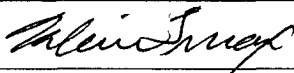
Best test to date on 07/12/09: 145 BO, 367 BW, 233 MCF, TP 61 psi, CP 0 psi.

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

Valerie Truax

Title Regulatory Admin Assistant

Signature



Date 07/16/2009

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

Date

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)

