

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD-ARTESIA

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

SUNDRY NOTICES AND REPORTS ON WELLS AUG 19 2009

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 K, SEC 25, T21S, R28E, 1980' FSL, 2130' FWL

5. Lease Serial No

NMLC067144

6. If Indian, Allottee or Tribe Name

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

8 Well Name and No.
Big Eddy Unit #66

9. API Well No

30-015-22682

10. Field and Pool, or Exploratory Area
Indian Flats (Atoka)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 checked="" 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 Swab well
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	& return well
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	to production

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, L.P. respectfully wishes to report wellbore swabbing and the return of the well to production:

06/03-04/2009 MIRU Mico swab unit. MIRU BJ Services. Load tbg-csg annulus w/ 0.50 bbls 2% KCl. Load tbg w/ 31 bbls 7.50% HCl acid w/ additives. Drop total of 120 1.3 ball sealers. Put away 5000 gals acid @ 5950 psi. Flush acid w/ 55 bbls 2% KCl. RD BJ. NU swab. Swab to "F" nipple @ 11,364' after 13 runs. Make total of 18 runs to recover 44 bbls fluid.

06/05/2009 Swab to "F" nipple @ 11,364' after 7 runs. Make total of 10 runs to recover 20 bbls fluid.

06/06/2009 Made 7 total runs from SN @ 11,366'.

06/09/2009 Find FL @ 10,900' FS. Make 5 total swab runs to recover 3 bbls.

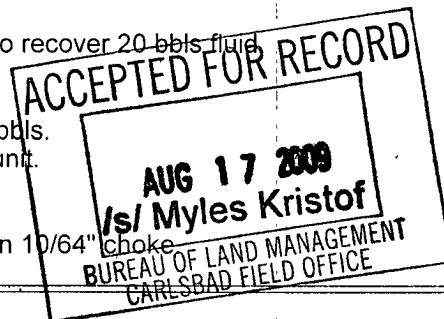
06/10-11/2009 Find FL @ 10,500' FS. Make 13 total swab runs to recover 9 bbls.

06/12/2009 Make 2 runs to recover no fluid. SD swab. SI well. RDMO swab unit.

06/13-7/13/2009 Well SI. Waiting for connection to the pipeline.

Best test to date on 07/14/09: 0 BO, 0 BW, 210 MCF, TP 315 psi, CP 0 psi on 10/64" choke

**Request that well name be changed to Big Eddy Unit #66.

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

Valerie Truax

Title Regulatory Admin Assistant

Signature

Date 07/14/2009

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)