Form 3160-5 (April 2004)

UNITEDSTATES DEPARTMENT OF THE INTERIORCD-ARTESIA

BUREAU OF LAND MANAGEMENT

FORMAPPROVED OM B No 1004-0137 Expires March 31, 2007

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	SUNDRY	NOTICES	AND	REPORTS	ON	WELLS
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SUNDRY	NOTICES AND RI	EPORIS ON WE	LLS	INIVIOZO	040	
Do not use the abandoned we	6 If Indian, Allottee or Tribe Name					
SUBMIT IN TRI	PLICATE - Other ins	structions on rever	se side.	7 If Unit	or CA/Agreement, Name and/or No.	
I Type of Well X Oil Well	8 Well Name and No					
2. NameofOperator BOPCO, L.P.				Hudsor 9 API We	n 1 Federal #10H ell No	
3a. Address	.,,,	3b. Phone No (includ	e area code)	30-015-37309 10 Field and Pool, or Exploratory Area Quahada Ridge (Delaware)		
P.O. Box 2760 Midland T.	X 79702	(432)683-22	77			
4 Location of Well (Footage, Sec	c., T, R., M, or Survey Desc	cription)				
UL J, 2300' FSL & 1780' I UL M, 742' FSL, 364' FW	11. County or Parish, State Eddy New Mexico					
12. CHECK AF	PROPRIATE BOX(ES)T	O INDICATE NATU	RE OF NOTICE, R	EPORT, O	R OTHER DATA	
TYPE OF SUBMISSION		TY	PEOF ACTION			
Notice of Intent Subsequent Report Final Abandonment Notice	Acidize AlterCasing Casing Repair Change Plans Convert to Injection	Decpen FractureTreat New Construction Plug and Abandon Plug Back	Production (State Production State Production Recomplete Temporarily At Water Disposal	pandon	Water Shut-Off Well Integrity X Other5th day of production	
If the proposal is to deepen dire Attach the Bond under which t following completion of the inv	ectionally or recomplete horizon the work will be performed or p volved operations. If the operational Abandonment Notices shall by for final inspection)	ntally, give subsurface location orovide the Bond No on file ion results in a multiple com be filed only after all require	ons and measured and to with BLM/BIA Requipletion or recompletion ements, including reclain	true vertical de ured subseque un a new inter mation, have b	work and approximate duration thereof epths of all pertinent markers and zones intreports shall be filed within 30 days rval, a Form 3160-4 shall be filed once ocen completed, and the operator has	
08/09/10 Well test numn	ing: 66 BO 1731 BW	/ 182 MCF TP 12	10 nei 1 P 50 ne	i CP 205	nsi on wide open choke	

RECEIVED SEP 2 9 2010 **NMOCD ARTESIA**

14 I hereby certify that the foregoing is true and correct Name (Printed/Typed)	1					
Valerie Truax	Title Regulatory Clerk					
Signature Taline Tray	Date	08/09/2010	1	CEPTED FOR RECO	JBD	
THIS SPACE FOR FEDERAL	OR	STATE OFFICE US	E		445	
Approved by		Title		DateAUG 2 8 2010		
Conditions of approval, if any, are attached Approval of this notice does not warr certify that the applicant holds legal or equitable title to those rights in the subject which would entitle the applicant to conduct operations thereon	lease	Office		WESLEY W. INGRAM		
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for a	ny person	h knowingly and willfully to i	nake to	ELECTOR OF THE PROPERTY OF THE	iled	