

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010

AUG 22 2016

RECEIVED

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.

5. Lease Serial No.
NMM14492
6. If Indian, Allottee or Tribe Name
7. If Unit or CA/Agreement, Name and/or No.

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		8. Well Name and No. MESA 8105 JV P 16H
2. Name of Operator BTA OIL PRODUCERS Contact: KAYLA MCCONNELL E-Mail: kmccconnell@btaoil.com		9. API Well No. 30-025-42851-00-X1
3a. Address 104 SOUTH PECOS STREET MIDLAND, TX 79701	3b. Phone No. (include area code) Ph: 432.682.3753	10. Field and Pool, or Exploratory JENNINGS
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 1 T26S R32E SESW 310FSL 2218FWL		11. County or Parish, and State LEA COUNTY, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 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 Change to Original APD
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

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 recomplete 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 recompletion 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.)

BTA Oil Producers, LLC respectfully request approval for the following drilling changes to the original approved APD.

A variance is requested for the following items listed below:

Choke Hose

- See attached test chart and specs.

Multi Bowl Wellhead

- Wellhead will be installed on a 13-3/8" casing and tested to onshore order #2 spec. No more than

SEE ATTACHED FOR
CONDITIONS OF APPROVAL

14. I hereby certify that the foregoing is true and correct.
Electronic Submission #345604 verified by the BLM Well Information System
For BTA OIL PRODUCERS, sent to the Hobbs
Committed to AFMSS for processing by PRISCILLA PEREZ on 07/25/2016 (16PP0956SE)

Name (Printed/Typed) KAYLA MCCONNELL	Title PRODUCTION ASSISTANT
Signature (Electronic Submission)	Date 07/25/2016

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By <u>Mustafa Haguel</u>	Title PETROLEUM ENGINEER	Date <u>08-17-2016</u>
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 <u>Hobbs</u>

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.

** BLM REVISED **

Additional data for EC transaction #345604 that would not fit on the form

32. Additional remarks, continued

30 days between tests. If any seal subject to testing is broken the system will be tested.
Manufacturer representative will be present for install.

- See attached schematic.

PECOS DISTRICT CONDITIONS OF APPROVAL

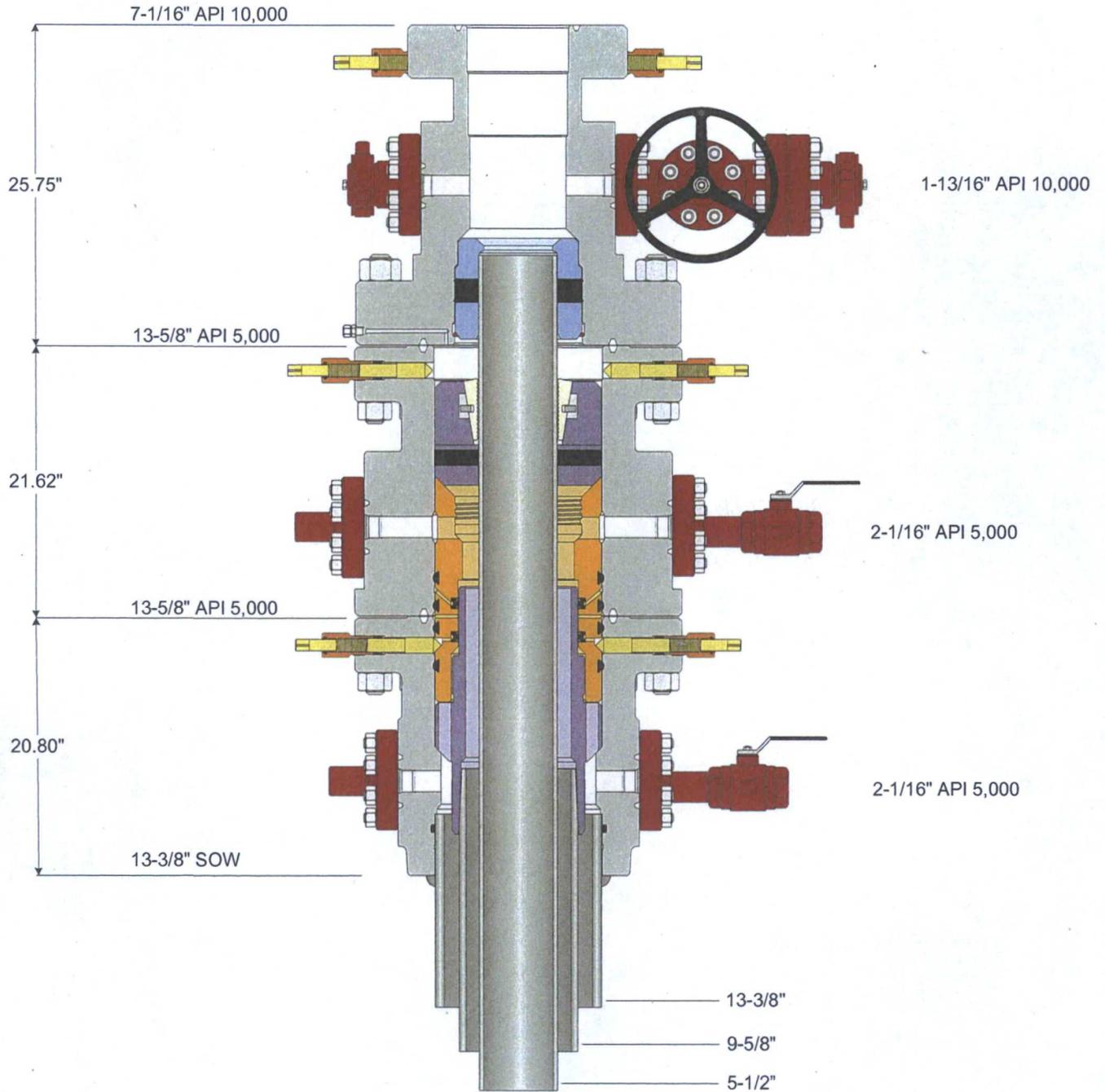
OPERATOR'S NAME:	BTA Oil Producers, LLC
LEASE NO.:	NMNM-14492
WELL NAME & NO.:	Mesa 8105 JV-P 16H
SURFACE HOLE FOOTAGE:	0310' FSL & 2218' FWL
BOTTOM HOLE FOOTAGE:	0230' FNL & 2218' FWL
LOCATION:	Section 01, T. 26 S., R 32 E., NMPM
COUNTY:	Lea County, New Mexico

All previous COAs still apply except the following:

A. PRESSURE CONTROL

1. Variance approved to use flex line from BOP to choke manifold. Check condition of flexible line from BOP to choke manifold, replace if exterior is damaged or if line fails test. Line to be as straight as possible with no hard bends and is to be anchored according to Manufacturer's requirements. The flexible hose can be exchanged with a hose of equal size and equal or greater pressure rating. **Anchor requirements, specification sheet and hydrostatic pressure test certification matching the hose in service, to be onsite for review. These documents shall be posted in the company man's trailer and on the rig floor.** If the BLM inspector questions the straightness of the hose, a BLM engineer will be contacted and will review in the field or via picture supplied by inspector to determine if changes are required (operator shall expect delays if this occurs).
2. **Operator has proposed a multi-bowl wellhead assembly. This assembly will only be tested when installed on the surface casing. Minimum working pressure of the blowout preventer (BOP) and related equipment (BOPE) required for drilling below the surface casing shoe shall be 3000 (3M) psi.**
 - a. **Wellhead shall be installed by manufacturer's representatives, submit documentation with subsequent sundry.**
 - b. **If the welding is performed by a third party, the manufacturer's representative shall monitor the temperature to verify that it does not exceed the maximum temperature of the seal.**
 - c. **Manufacturer representative shall install the test plug for the initial BOP test.**
 - d. **Operator shall perform the intermediate casing integrity test to 70% of the casing burst. This will test the multi-bowl seals.**
 - e. **If the cement does not circulate and one inch operations would have been possible with a standard wellhead, the well head shall be cut off, cementing operations performed and another wellhead installed.**

NOTE: THIS DRAWING IS NOT TO SCALE. THE DIMENSIONS REFLECTED ON THIS DRAWING ARE ESTIMATED DIMENSIONS AND ARE FOR REFERENCE ONLY.



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Customer: BTA OIL PRODUCERS	Project No.: 146245	Quote No.: 291545 v2
Project Name: WEST TEXAS	Date: 07/06/16	Drawn By: JL

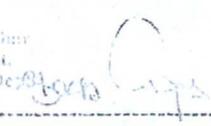


ContiTech

CONTITECH RUBBER Industrial Kft.	No:QC-DB- 599/ 2014 Page: 16 / 176
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Rig 94

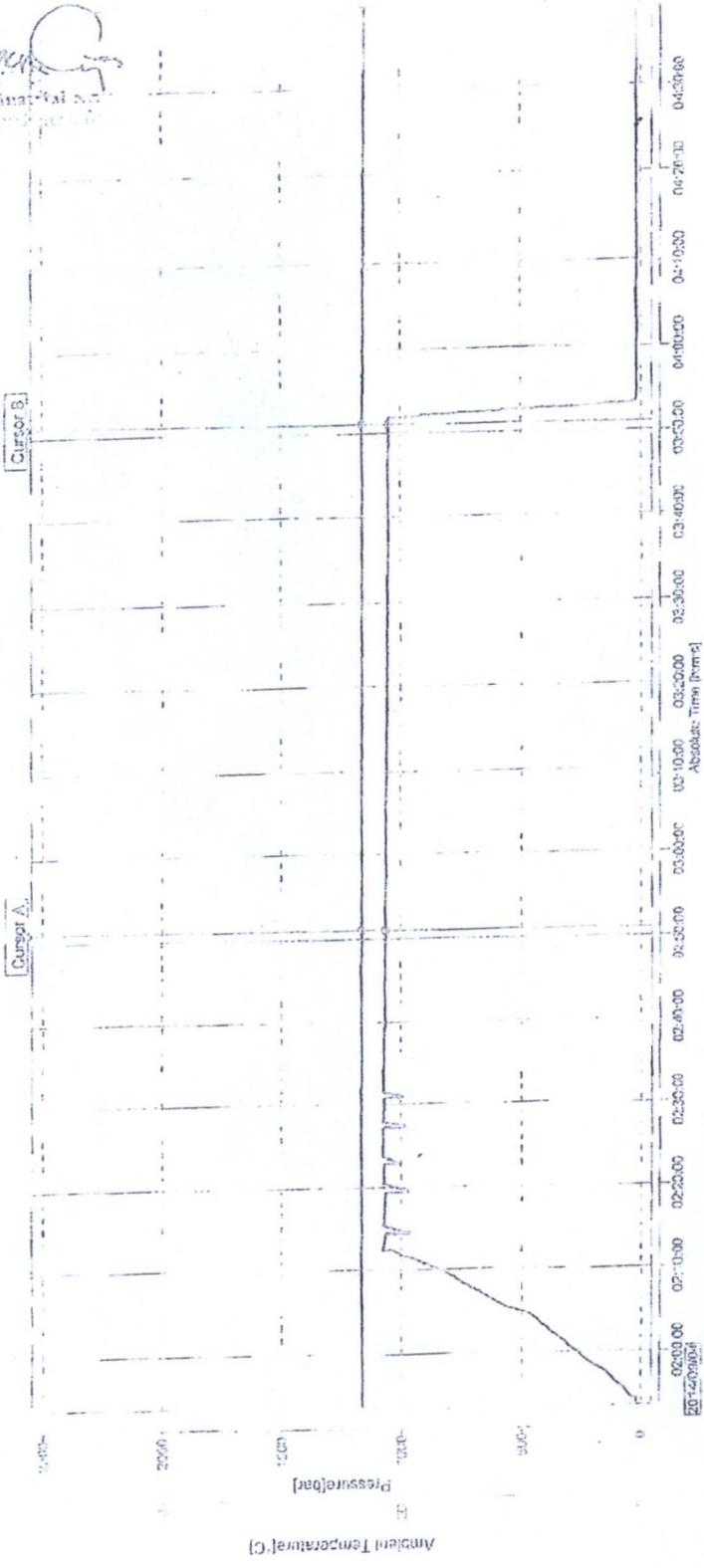
ASSET 24455

QUALITY CONTROL INSPECTION AND TEST CERTIFICATE				CERT. N°: 1592	
PURCHASER: ContiTech Oil & Marine Corp.			P.O. N°: 4500461753		
CONTITECH ORDER N°	539225	HOSE TYPE:	3" ID	Choke & Kill Hose	
HOSE SERIAL N°	68547	NOMINAL / ACTUAL LENGTH:		7,62 m / 7,66 m	
W.P.	68,9 MPa	10000 psi	T.P.	103,4 MPa	15000 psi
			Duration:	60	min.
Pressure test with water at ambient temperature					
See attachment. (1 page)					
→		10 Min.			
↑		50 MPa			
COUPLINGS Type	Serial N°		Quality	Heat N°	
3" coupling with 4 1/16" 10K API Swivel Flange end Hub	2574	5533	AISI 4130	A1582N	H8672
			AISI 4130	58855	
			AISI 4130	A1199N	A1423N
Not Designed For Well Testing			API Spec 16 C		
Fire Rated			Temperature rate:"B"		
All metal parts are flawless					
WE CERTIFY THAT THE ABOVE HOSE HAS BEEN MANUFACTURED IN ACCORDANCE WITH THE TERMS OF THE ORDER INSPECTED AND PRESSURE TESTED AS ABOVE WITH SATISFACTORY RESULT.					
STATEMENT OF CONFORMITY: We hereby certify that the above items/equipment supplied by us are in conformity with the terms, conditions and specifications of the above Purchaser Order and that these items/equipment were fabricated inspected and tested in accordance with the referenced standards, codes and specifications and meet the relevant acceptance criteria and design requirements.					
Date:	Inspector	Quality Control			
04 September 2014.		 			

1.000 sec
 2014/09/04 01:53:54.000
 Start Time
 2014/09/04 04:39:39.000
 Stop Time

File Name : 000220_88543_88545+547.GEV000236_08543_88545+547.GEV
 File Message : 88543_88545_88547
 Device Type : GX10
 Serial No. : S4P676399
 Data Count : 8046
 Print Group : Press-Temp
 Print Range : 2014/09/04 01:53:54.000 - 2014/09/04 04:39:39.000
 Comment :

Cursor A	Cursor B	Difference
01:53:54.000	04:39:39.000	3600
2014/09/04 02:51:05.000	2014/09/04 03:00:10.000	51.000000
Value A	Value B	Value B-A
1092.05	1045.57	-46.48
23.24	23.14	-0.10



30mmx45