Form 3160-5. (February 2005) ...

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

UC	FORM APPROVED
	OMB No 1004-0137
	Expires March 31, 2007
٠, ٠,	5 Lease Serial No
	6 If Indian, Allottee or Tribe Name

Do not use this f	orm for proposals to Use Form 3160-3 (Al	6 If Indian, Allottee or	Tribe Name	,		
	IN TRIPLICATE - Other			7 If Unit of CA/Agreer	nent, Name and/or No	
Type of Well Gas W	/ell Other	Jater Inject	tion	8 Well Name and No.	S-B-Fed NCT-1	<u></u>
2 Name of Operator B C OPERATING, INC	/			9 API Well No SO-O=	25-12656/	,
3a Address PO BOX 50820 MIDLAND, TX 79710	,	3b Phone No (include area c 432-683-2950	ode)	10 Field and Pool or Ex Phides L	lates-Seven Ri	vec
4 Location of Well (Footage, Sec. T.	リテレント	SE41SW4 Tabs R37E	NMPM	I Country or Parish, S LEA COUNTY, NEW	,	
12 CHEC	K THE APPROPRIATE BO	X(ES) TO INDICATE NATUI	RE OF NOTIC	E, REPORT OR OTHE	R DATA	·
TYPE OF SUBMISSION		. T	YPE OF ACT	ION	t .	
Notice of Intent	Acidize Alter Casing	Deepen Fracture Treat	=	uction (Start/Resume)	Water Shut-Off Well Integrity	•
X Subsequent Report	Casing Repair Change Plans	New Construction Plug and Abandon	=	mplete oorarily Abandon	Other CHANGE OF OPERATOR	
Final Abandonment Notice	Convert to Injection	Plug Back	☐ Wate	r Disposal	,	
13 Describe Proposed or Completed Op the proposal is to deepen directions Attach the Bond under which the w following completion of the involv testing has been completed Final A	ally or recomplete horizontally ork will be performed or project operations. If the operation	y, give subsurface locations an vide the Bond No. on file with in results in a multiple complet	d measured an BLM/BIA. R ion or recomp	d true vertical depths of equired subsequent repo letion in a new interval,	all pertinent markers and zone irts must be filed within 30 day a Form 3160-4 must be filed o	es /s nce

CHANGE OF OPERATOR EFFECTIVE 8-1-07 FROM SMITH & MARRS, INC.

determined that the site is ready for final inspection)

(Instructions on page 2)

RECEIVED

JAN 06 7009

HOBBSOCD

14 I hereby certify that the foregoing is true and correct Name (PrintedTyped) MICHAEL BLACK	tle PRESIDENT					
Signature Mullim Da	te 90 Joy APPROVED					
THIS SPACE FOR FEDERAL OR STATE OFFICE USE						
Approved by	DEC 2008					
Conditions of approval, if any, are anached Approval of this notice does not warrant or certife 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 BUREAU OF LAND MANAGE					
Title 18 U S C Section 1001 and Title 43 U S C Section 1212, make it a crime for any person fictitious or fraudulent statements or representations as to any matter within its jurisdiction	1 knowingly and willfully-to-make to any department of agency of the United States any false					