

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTHOBBS OCD  
APR 11 2017  
RECEIVEDFORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010**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 <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM0359292
2. Name of Operator RKI EXP & PROD, LLC		6. If Indian, Allottee or Tribe Name
Contact: JESSICA M DEMARCE E-Mail: jessica.demarce@wpenergy.com		7. If Unit or CA/Agreement, Name and/or No.
3a. Address 3500 ONE WILLIAMS CENTER MD35 TULSA, OK 74172	3b. Phone No. (include area code) Ph: 539-573-3521	8. Well Name and No. GOEDEKE 1
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 10 T26S R33E 660FSL 1980FEL		9. API Well No. 30-025-08406
		10. Field and Pool, or Exploratory SALADO DRAW; DELAWARE
		11. County or Parish, and State LEA COUNTY COUNTY, 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
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Site Facility Diagram/Security Plan
	<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 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.)

SFD DATED 8/10/2016 ABSM DATED 8/10/2016 ATTACHED

Accepted for Record Purposes.  
Approval Subject to Onsite Inspection.  
Date: 2/5/17ENTERED 2/5/17  
INTO AFMSS

14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #349048 verified by the BLM Well Information System For RKI EXP & PROD, LLC, sent to the Hobbs Committed to AFMSS for processing by DEBORAH MCKINNEY on 09/01/2016 ()	
Name (Printed/Typed) JESSICA M DEMARCE	Title REGULATORY TECH
Signature (Electronic Submission)	Date 08/25/2016

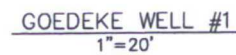
**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**


Approved By <i>[Signature]</i>	Title EPS, LUE	Date 2/5/17
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.

**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\****[Signature]*

PLOT: Wednesday, August 10, 2016 10:07:44 AM / FILE NAME: ARSM - GORDOVE WELL #1.dwg

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	FAC. NO. GOEDEKE WELL #1	
	WELL LEO _____	
	FAC. TYPE WELLSITE	
	WELL LEO _____	
HORIZ 1" = 20'		SPIN 05 --
SPIN 05 WPX ENERGY		
TITLE AS-BUILT SITE MAP		
SHEET 16A COUNTY NM		
CLASS _____		FILE NO. ARSM-01



Accepted For Record Purposes.  
Approval Subject to Onsite Inspection.  
Date: \_\_\_\_\_

