

Operator Copy

Form 3160-4
(August 2007)UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5. Lease Serial No.
NMNM100558

1a. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other		6. If Indian, Allottee or Tribe Name	
b. Type of Completion <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Diff. Resvr. Other _____		7. Unit or CA Agreement Name and No.	
2. Name of Operator RKI EXPLORATION & PROD LLC E-Mail: cahn@rkixp.com		8. Lease Name and Well No. RDX 15 11	
3. Address 3817 NW EXPRESSWAY SUITE 950 OKLAHOMA CITY, OK 73112		9. API Well No. 30-015-37093-00-S1	
4. Location of Well (Report location clearly and in accordance with Federal requirements) At surface SENW 2200FNL 1500FWL 32.043879 N Lat, 103.872857 W Lon At top prod interval reported below SENW 2200FNL 1500FWL At total depth SENW 2200FNL 1500FWL		10. Field and Pool, or Exploratory BRUSHY DRAW-DELAWARE	
14. Date Spudded 01/08/2012		15. Date T.D. Reached 01/28/2012	
16. Date Completed 03/03/2012		17. Elevations (DF, KB, RT, GL)* 3114 GL	
18. Total Depth: MD TVD 7616		19. Plug Back T.D.: MD TVD 7570	
20. Depth Bridge Plug Set: MD TVD		21. Type Electric & Other Mechanical Logs Run (Submit copy of each) NEUTRON GAMMARAY DENSITY CALIPERLOGS	
22. Was well cored? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Directional Survey? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis)			

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23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sk. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
17.500	13.375 J-55	54.5	0	884		730		0	
12.250	9.625 J-55	40.0	0	3610		1250		0	
7.875	5.500 N-80	17.0	0	7616	5027	1240		1600	

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2.875	5686							

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) DELAWARE	5724	7298	5724 TO 6090	0.420	130	3 STAGES (4, 5 AND 6) COMBIN
B)			6505 TO 6664	0.420	40	
C)			6738 TO 6938	0.420	60	
D)			7128 TO 7298	0.420	38	

27. Acid, Fracture, Treatment, Cement Squeeze, Etc.

Depth Interval	Amount and Type of Material
5724 TO 7298	START ON 3,000 GALLONS OF 30# LIN-GEL PUMP 9,110 GALLONS OF 15% HCL ACID, 80,783 GALS OF DELTA FRAC

RECLAMATION
DUE 7-3-12

28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr API	Gas Gravity	Production Method
03/03/2012	03/10/2012	24	→	128.0	124.0	601.0	36.7		ELECTRIC PUMP SUB-SURFACE
Choke Size	Tbg. Press. Flwg. SI	Csg. Press	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas Oil Ratio	Well Status	
N/A	180	150.0	→	128	124	601		POW	

28a. Production - Interval B

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas Oil Ratio	Well Status	
			→						

(See Instructions and spaces for additional data on reverse side)

ELECTRONIC SUBMISSION #138966 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED **

BUREAU OF LAND MANAGEMENT
CAMPBELL FIELD OFFICE

ACCEPTED FOR RECORD

JUN 16 2012

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Date First Produced	Test Date	Hours Tested	Test Production ▶	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke-Size	Tbg. Press Flwg. SI	Csg. Press	24 Hr Rate ▶	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	

30. Summary of Porous Zones (Include Aquifers):

31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top
					Meas. Depth
DELAWARE	3629	7476		DELAWARE BONE SPRING	3629 7476

33. Circle enclosed attachments:

34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions):

Title HS&E/REGULATORY MANAGER

Date 05/24/2012

** REVISED ** REVISED ** REVISED ** REVISED ** REVISED ** REVISED ** REVISED ** REVISED ** REVISED **