

Submit 1 Copy To Appropriate District Office  
 District I – (575) 393-6161  
 1625 N. French Dr., Hobbs, NM 88240  
 District II – (575) 748-1283  
 811 S. First St., Artesia, NM 88210  
 District III – (505) 334-6178  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV – (505) 476-3460  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 Revised August 1, 2011

OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

WELL API NO. 30-015-41275
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name RDX 16
8. Well Number 17H
9. OGRID Number 246289
10. Pool name or Wildcat Wildcat (Bone Spring)

**SUNDRY NOTICES AND REPORTS ON WELLS**  
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well  Gas Well  Other

2. Name of Operator  
RKI Exploration & Production, LLC

3. Address of Operator  
210 Park Avenue, Suite 900, Oklahoma City, OK 73102

4. Well Location  
Unit Letter D : 250 feet from the North line and 675 feet from the West line  
Section 16 Township 26S Range 30E NMPM Eddy County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3094 feet GR

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<p><b>NOTICE OF INTENTION TO:</b></p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/></p> <p>DOWNHOLE COMMINGLE <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>	<p><b>SUBSEQUENT REPORT OF:</b></p> <p>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/></p> <p>CASING/CEMENT JOB <input checked="" type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>
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13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

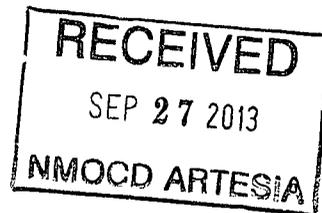
On 6/27/2013 Placed 1000 psi on well, ran CBL/GR/CCL to surface. Estimated TOC at 3270. Drill out cement to 11,970' PBDT @ 12,077 feet.

Pressured tested 5 1/2" casing to 8500 psi. held pressure for 30 minutes with no bleed off.

8/13/2013 to 8/14/2013 Perforated from 8,048 feet to 11,920 feet in 16 stages.

Acidized with 24,000 gallons of HCL acid. Total sand pumped: 199,535 LBS, TLR: 5,208 BBLS

8/19/2013-Began Flowback



Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE *R Lampley* TITLE: Regulatory Analyst DATE 9/25/2013

Type or print name Robyn Lampley E-mail address: rlampley@rkixp.com PHONE: 405-996-5775

**For State Use Only**

APPROVED BY: *R Dade* TITLE Dist. H. Supervisor DATE 9/30/13

Conditions of Approval (if any):