

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 July 18, 2013

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

WELL API NO. 30-015-42234
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 40473
7. Lease Name or Unit Agreement Name LVP SWD
8. Well Number 1
9. OGRID Number 246289
10. Pool name or Wildcat SWD; DELAWARE

**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

3. Address of Operator 210 PARK AVE, STE. 900, OKC, OK 73102

4. Well Location  
 Unit Letter 1 : 2100 feet from the SOUTH line and 385 feet from the EAST line  
 Section 4 Township 23S Range 28E NMPM County EDDY

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3009' GL

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL. <input type="checkbox"/>	CASING/CEMENT JOB <input checked="" type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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 07/16/2014 drilled 17 1/2" hole to 454'.  
 Run 110 joints of 7" 26#, K-55, LTC Casing (Shoe @ 4691' FC @ 4645') test lines to 4000psi.

Cement:  
 Lead 675sx Argolite, 10.5#, YD-2.24; Tail 200sx 13#, YD 1.48 ; (full returns while cementing)  
 Final cir. Pressure of 960psi; FULL RETURNS THROUGHOUT; Cir. 18 bbls (45sx) to surface; test t/ 3000psi;

Rig Released 07/18/2014

Spud Date: 07/08/2014      Rig Release Date: 07/18/2014

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

SIGNATURE *Heather Brehm* TITLE Regulatory Analyst DATE 11/13/2014

Type or print name Heather Brehm E-mail address: hbrehm@rkixp.com PHONE: 405-996-5769

**For State Use Only**

APPROVED BY: *Dr. Dade* TITLE *Dr. H. Spewison* DATE *11/21/2014*

Conditions of Approval (if any):