

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM 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.*

5. Lease Serial No.  
NMNM54290

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

**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		8. Well Name and No. NORTH BRUSHY DRAW FEDERAL 35 4H
2. Name of Operator RKI EXPLORATION & PRODUCTION Contact: HEATHER BREHM E-Mail: hbrehm@rkixp.com		9. API Well No. 30-015-42290
3a. Address 210 PARK AVE STE. 900 OKLAHOMA CITY, OK 73102	3b. Phone No. (include area code) Ph: 405-996-5769 Fx: 405-996-5772	10. Field and Pool, or Exploratory WOLFCAMP
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 35 T25S R29E Mer NMP SESW 175FSL 2365FWL 32.079450 N Lat, 103.955980 W Lon		11. County or Parish, and State EDDY 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 Drilling Operations
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<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 recomplete 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 recompletion 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.)

*rejected*  
\*\*REPLACE ET#292401\*\*CORRECTED WELL NAME/FIELD/TYPE

PRODUCTION SUNDRY

On 12/30/14 drilled 8.5in hole to 14717'. Ran a total of 365 joints 5 1/2" 23# HCP-110 BTC Csg. Set shoe @ 14718, FC @ 14636, DVTool @ 5514'.

Pumped cmt 1350sx Acid Solid PVL with additives mixed @ 13 ppg & 1.87 cuft/sk bumped plug with 2150 psi, floats held. Saw full returns throughout the cement job.

Release Rig 12/31/2014.

*APD 8/12/15*  
Accepted for record  
NMOCD

**NM OIL CONSERVATION**  
ARTESIA DISTRICT  
AUG 11 2015

RECEIVED

14. I hereby certify that the foregoing is true and correct. Electronic Submission #296297 verified by the BLM Well Information System For RKI EXPLORATION & PRODUCTION, sent to the Carlsbad, NM Office Committed to AFMSS for processing by MARISSA KLEIN on 06/10/2015		<div style="border: 2px solid black; padding: 5px; text-align: center;"> <p><b>ACCEPTED FOR RECORD</b></p> <p>AUG 6 2015</p> <p><i>[Signature]</i></p> <p>BUREAU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE</p> </div>
Name (Printed/Typed) HEATHER BREHM	Title REGULATORY ANALYST	
Signature (Electronic Submission)	Date 03/26/2015	

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____
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 \*\***