

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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.

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. NMNM67980 |
| 2. Name of Operator RKI EXPLORATION&PRODUCTION LLC | | 6. If Indian, Allottee or Tribe Name |
| 3a. Address 3500 ONE WILLIAMS CENTER MD35 TULSA, OK 74172 | | 7. If Unit or CA/Agreement, Name and/or No. |
| 3b. Phone No. (include area code) Ph: 539-573-3521 | | 8. Well Name and No. SANTA FE FEDERAL DEEP 35-1 |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 35 T22S R28E 690FNL 1310FWL | | 9. API Well No. 30-015-37917 |
| | | 10. Field and Pool, or Exploratory DUBLIN RANCH MORROW |
| | | 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 Site Facility Diagram/Security Plan |
| | <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.)

Attached are updated SFD from 10/20/2016 and updated ABSM from 10/20/2016.

AC 4-11-17
Accepted for record - NMOCD

Accepted for Record Purposes.
Approval Subject to Onsite Inspection.
Date: 02/03/2017

ENTERED 02/03/17
INTO AFMSS

BUREAU OF LAND MANAGEMENT
ARTESIA DISTRICT
APR 10 2017
RECEIVED

| | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|
| 14. I hereby certify that the foregoing is true and correct. Electronic Submission #355523 verified by the BLM Well Information System For RKI EXPLORATION&PRODUCTION LLC, sent to the Carlsbad Committed to AFMSS for processing by DEBORAH MCKINNEY on 10/21/2016 () | |
| Name (Printed/Typed) JESSICA M DEMARCE | Title REGULATORY TECHNICIAN |
| Signature (Electronic Submission) | Date 10/21/2016 |

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

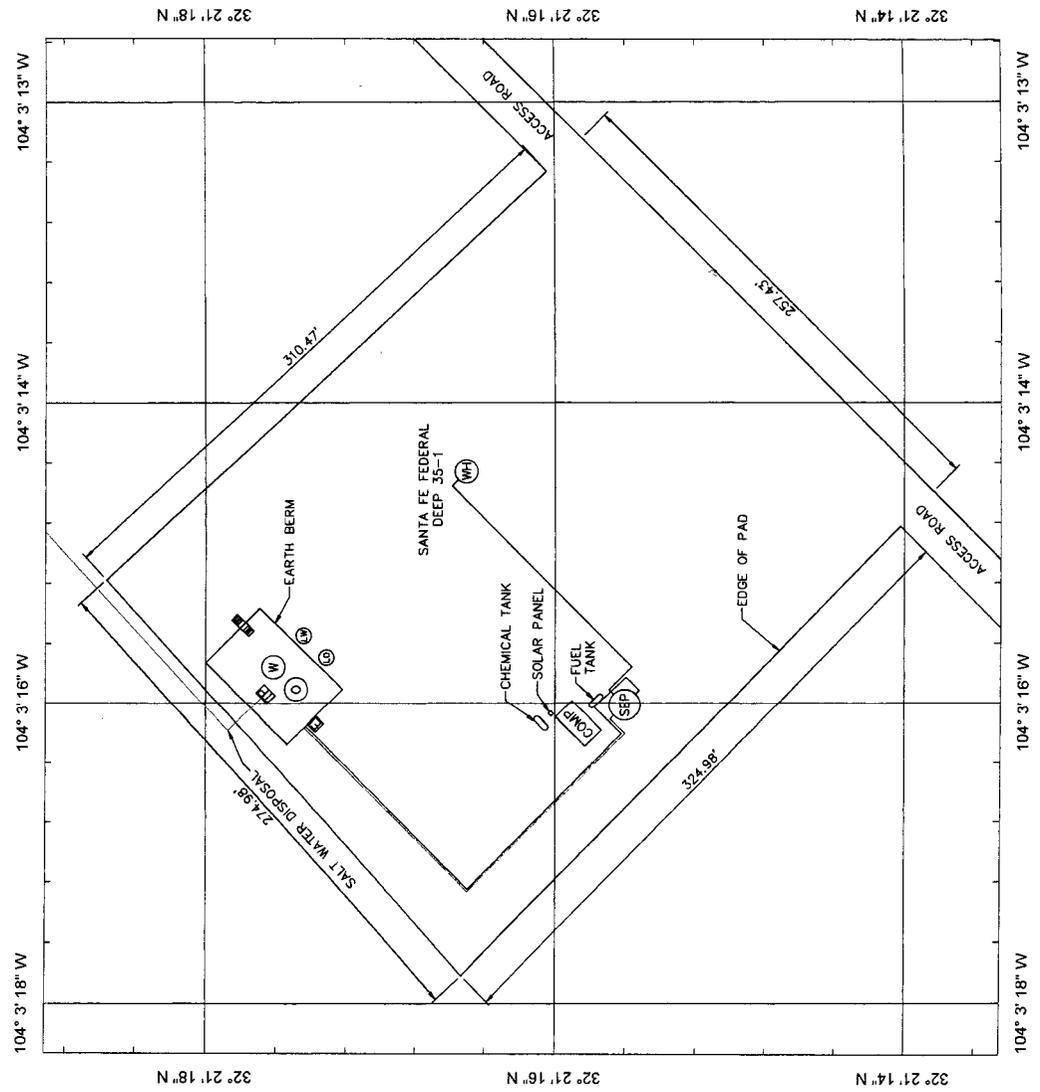
| | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|----------------------|
| Approved By <i>Jessica Demarce</i> | Title <i>EPS - JIE</i> | Date <i>02/03/17</i> |
| 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.

LEGEND

| | |
|--------|------------------------|
| UG | UNDERGROUND |
| AG | ABOVE GROUND |
| UP | UTILITY POLE |
| E | ELECTRICAL PANEL/BOX |
| SP | SOLAR PANEL |
| GEN | GENERATOR |
| | OVERHEAD POWER LINE |
| | ELECTRIC LINE (UG) |
| | ELECTRIC LINE (AG) |
| | OIL FLOWLINE (UG) |
| | OIL FLOWLINE (AG) |
| | RECYCLE FLOWLINE (UG) |
| | RECYCLE FLOWLINE (AG) |
| | WATER FLOWLINE (UG) |
| | WATER FLOWLINE (AG) |
| | GAS FLOWLINE (UG) |
| | GAS FLOWLINE (AG) |
| | UNKNOWN FLOWLINE (UG) |
| | UNKNOWN FLOWLINE (AG) |
| | EDGE OF PAD |
| | FENCE |
| (FWK) | FREE WATER KNOCKOUT |
| (LO) | LOAD OUT VALVE (OIL) |
| (LV) | LOAD OUT VALVE (WATER) |
| | METER |
| (MTR) | METER |
| (PU) | PUMPING UNIT |
| (R) | RECYCLE PUMP |
| (SEP) | SEPARATOR |
| (T) | TANK (OIL) |
| (W) | TANK (WATER) |
| (BLD) | BUILDING |
| (COMB) | COMBUSTOR |
| (HT) | HEATER TREATER |
| (FL) | FLARE |
| (FS) | FLARE SEPARATOR |
| (WH) | WELLHEAD |
| (SCP) | SURVEY CONTROL POINT |
| (A) | WELD |
| (R) | RISER (SIZE) |
| (S) | STAIRS |
| (TP) | TRANSFER PUMP |
| (COMP) | COMPRESSOR |

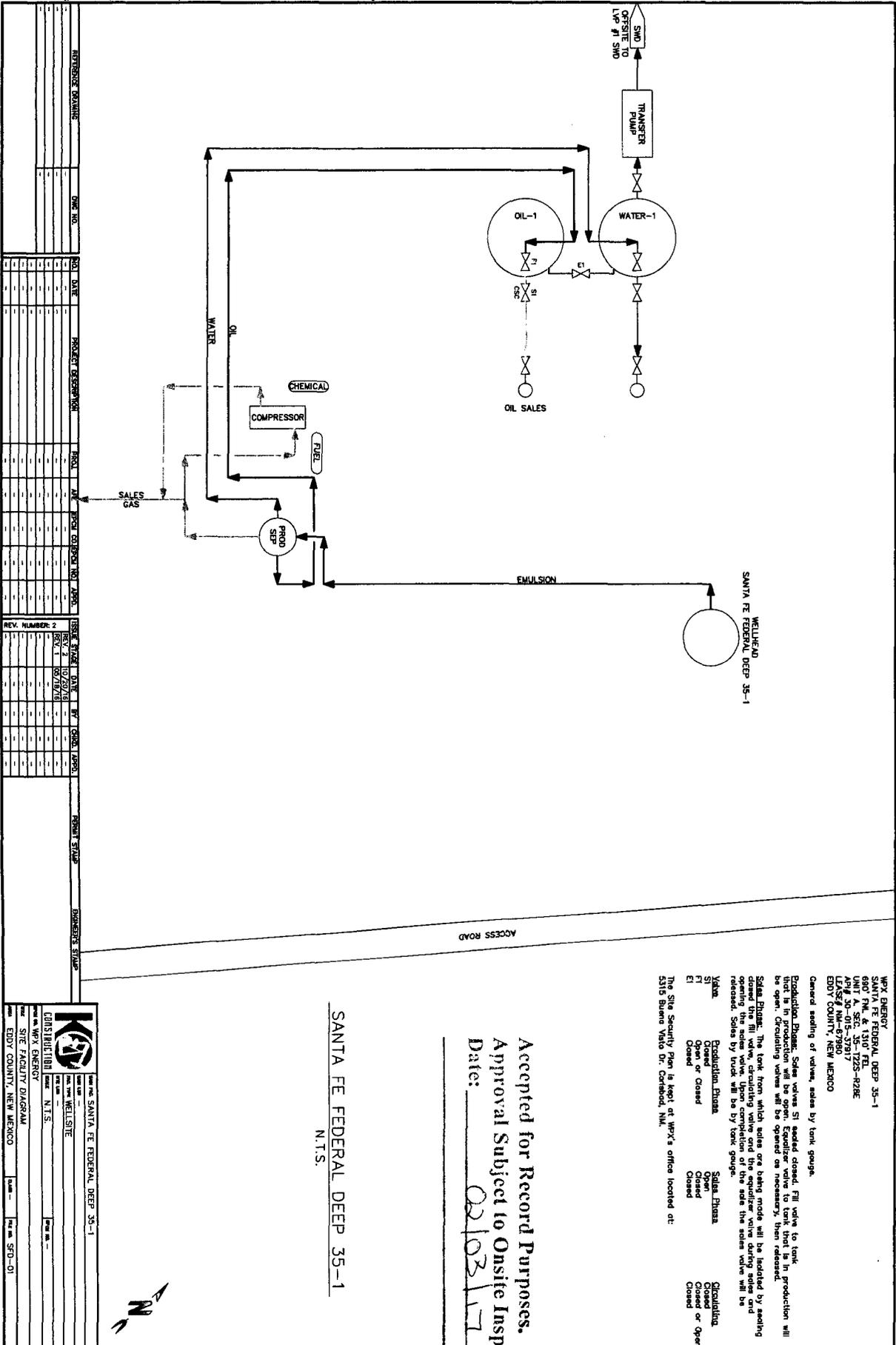
SANTA FE FEDERAL DEEP 35-1
1"=60'



K&A CONSTRUCTION
 SANTA FE FEDERAL DEEP 35-1
 AS-BUILT SITE MAP
 EDDY COUNTY, NM.

| REV. NO. | DATE | PROJECT DESCRIPTION | PROJ. NO. | DATE | BY | CHKD. / APPR. | PERMIT STAMP | ENGINEER'S STAMP |
|----------|----------|----------------------------|-----------|------|----|---------------|--------------|------------------|
| 1 | 02/03/17 | SANTA FE FEDERAL DEEP 35-1 | | | | | | |

Accepted for Record Purposes.
 Approval Subject to Onsite Inspection.
 Date: 02/03/17



| REV. NO. | DATE | DESCRIPTION | BY | CHKD. | APPD. |
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WELLSITE
 SANTA FE FEDERAL DEEP 35-1
 WELLSITE

CONSTRUCTION
 N.T.S.

WAX ENERGY
 SITE FACILITY DIAGRAM
 EDDY COUNTY, NEW MEXICO

Scale: 1" = 100'

WAX ENERGY
 SANTA FE FEDERAL DEEP 35-1
 690' FM. & 1310' FEEL
 UNIT NO. 501-2723-929E
 UNIT NO. 501-2723-929E
 LEASE# NM-57900
 EDDY COUNTY, NEW MEXICO

General setting of valves, sales by tank gauges.

Production Block: Sales valves SI sealed closed. Fill valve to tank, SI open. Production valve to tank that is in production will be open. Production valves will be opened as necessary, then released.

Sales Block: The tank from which sales are being made will be isolated by sealing the sales valve. When opening the sales valve, the sales valve will be released. Sales by truck will be by tank gauges.

Valves: Production Block: SI Open, SI Closed, SI Open or Closed. Sales Block: SI Open, SI Closed, SI Open or Closed.

The Site Security Plan is kept at WAX's office located at: 5315 Buena Vista Dr. Corbalan, NM.

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SANTA FE FEDERAL DEEP 35-1
 N.T.S.