

NM OIL CONSERVATION  
ARTESIA DISTRICT

NOV 28 2018

Form C-103

Revised July 18, 2013

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

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

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|---|
| RECEIVED NO.<br>30-015-45043  |
| 5. Indicate Type of Lease<br>STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 6. State Oil & Gas Lease No.  |
| 7. Lease Name or Unit Agreement Name<br>CASS DRAW 10-23-27 FEE                                      |
| 8. Well Number 401H   |
| 9. OGRID Number 246289  |
| 10. Pool name or Wildcat<br>PURPLE SAGE; WOLFCAMP (GAS) 98220                                       |

**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  
 3500 ONE WILLIAMS CENTER, MD: 35, TULSA, OK 74172

4. Well Location  
 Unit Letter H : 2619 feet from the N line and 338 feet from the E line  
 Section 9 Township 23S Range 27E NMPM County EDDY

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
 3,116 GL

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

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

ND BOP, Install TA Cap, test TA Cap to 5K psi - test good.  
 Rig released on 11/15/2018 @ 02:30 AM

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 Lorri Kline Digitally signed by Lorri Kline  
DN: cn=Lorri Kline, o=Oil  
email=LORRI.KLINE@WPXENERGY.CO  
M, c=US  
Date: 2018.11.27 14:31:21 -0600 TITLE REGULATORY TECH DATE 11/27/2018

Type or print name LORRI KLINE E-mail address: lorri.kline@wpxenergy.com PHONE: 539-573-3518

APPROVED BY: Rusty Lee TITLE Business Ops Mgr DATE 11-30-2018  
 Conditions of Approval (if any):