Form 3160-5 (June 2015)						FORM APPROVED OMB NO. 1004-0137 Expires: January 31, 2018 5. Lease Serial No. NMNM54290 6. If Indian, Allottee or Tribe Name		
SUBMIT IN TRIPLICATE - Other instructions on page 2						7. If Unit or CA/Agreement, Name and/or No.		
1. Type of Well	🛛 Gas Well 🔲 Otl	ıer				8. Well Name and No. NORTH BRUSHY DRAW FEDERAL 35 51		
2. Name of Ope RKI EXPL	rator ORATION & PROD	CRYSTAL FULTON n@wpxenergy.com			9. API Well No. 30-015-42291			
3a, Address 3500 ONE TULSA, O	WILLIAMS CENTE K 74172	3b. Phone No. (include area code) Ph/3519-513-02-10 SEMMA TION ARTESIA DISTRICT			10. Field and Pool or Exploratory Area PURPLE SAGE;WOLFCAMP(GAS			
4. Location of V	Well (Footage, Sec., 7	APR 0 5 2017			11. County or Parish, State			
Sec 35 T2	5S R29E 230FNL 2	300FWL				EDDY COUNTY, NM		
				RECEIVED)			
12	. CHECK THE AI	PPROPRIATE BOX(ES)	TO INDICA	TE NATURE (OF NOTICE	, REPORT, OR OTI	HER DATA	
TYPE OF	SUBMISSION			TYPE OF ACTION				
□ Notice of	of Intent	☐ Acidize	🗖 Dee	 Deepen Hydraulic Fracturing 		tion (Start/Resume)	□ Water Shut-Off	
_		Alter Casing	🗖 Hyd			nation	Well Integrity	
🛛 Subseque	-	Casing Repair	pair DNew Construction DRecomplete		plete	Other Drilling Operations		
🗖 Final Ab	andonment Notice	Change Plans		g and Abandon		rarily Abandon	Drining Operations	
		Convert to Injection	🗆 Plu					
If the propose Attach the Bo following con testing has be determined th	al is to deepen direction ond under which the wo npletion of the involved een completed. Final Al nat the site is ready for f		give subsurface the Bond No. o sults in a multip ed only after all	locations and meas n file with BLM/Bl le completion or re requirements, inclu	sured and true v IA. Required su completion in a uding reclamation	ertical depths of all pertin bsequent reports must be new interval, a Form 316 on, have been completed	nent markers and zones. Filed within 30 days 50-4 must be filed once and the operator has	
RKI EXPLO OF THE D	ORATION AND PR RILLING OPERATI	ODUCTION, LLC HAS CO ON IS AS FOLLOWS:	ONCLUDED	THE DILLING (OPERATION	S FOR THIS WELL.	A SUMMARY	
Spud: 2/23	/2017							
		54.5# J-55 STC: 0? ? 633 eld. Circ 60 bbls to sfc.	? CMT: LEA	D 350 sks @13	.5 ppg, TAIL:	200 sks @		
Intermedia sks @14.8	te: 2/26/2017 - 9-5/ ppg, bump plug @	8? 40# J-55 LTC: 0? ? 3, 800psi, floats held. Circ !	173' CMT: LE 57 bbl to sfc.	EAD 605 sks @	12.9 ppg, TA	AIL: 200		
2nd Interm	ediate: 3/5/2017 - 7	?? 29# HCP-110 BTC: 0?	? 10,971? C	MT: LEAD 615	sks @ 11.2 p	opg, TAIL:		
14. I hereby cer	tify that the foregoing is	Electronic Submission #	370819 verifie RATION & PF	d by the BLM W OD LL, sent to	ell Informatio the Carlsbad	n System		
Name (Printe	d/Typed) CRYSTAL	FULTON		Title PERM		HI		
Signature	(Electronic S	Submission)		Date 03/23/	2017			
		THIS SPACE FO	OR FEDER		OFFICE U	SE	s will =	
						SE nding BLM approval nding BLM approval pr	5/10	
Approved By				Title	pe'	homequenting	·	
certify that the app		d. Approval of this notice does uitable title to those rights in the act operations thereon.		Office	51	ubsequences and scanned RM-	•	
Title 18 U.S.C. Se States any false,	ction 1001 and Title 43 fictitious or fraudulent	U.S.C. Section 1212, make it a statements or representations as	crime for any p to any matter w	erson knowingly ar within its jurisdiction	nd willfully to 1. n.	repartment or	agency of the United	

(Instructions	on	page	2)
(Instructions	on	page	2)

Additional data for EC transaction #370819 that would not fit on the form

32. Additional remarks, continued

235 sks @ 15.6 ppg, bump plug @ 700 psi, floats held. Circ 35 bbl to sfc.

Production Liner: 3/12/2017 - 4-1/2? 13.5# HCP-110 CDC-HTQ: 10,028? ? 15,411? CMT: 335 sks @ 13.0 ppg, bump plug @2600 psi, floats held. Full returns throughout job. Circ 35 bbl off liner.

Post Job Reports Attached

RNP.