

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. 30-015-45042
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name BINDEL 4 FEE
8. Well Number 1H
9. OGRID Number 246289
10. Pool name or Wildcat PURPLE SAGE; WOLFCAMP (GAS)

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 : 1795 feet from the NORTH line and 700 feet from the EAST line
Section 4 Township 23S Range 27E NMPM County EDDY

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3,151 RKB

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

<p>NOTICE OF INTENTION TO:</p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/></p> <p>DOWNHOLE COMMINGLE <input type="checkbox"/></p> <p>CLOSED-LOOP SYSTEM <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>	<p>SUBSEQUENT REPORT OF:</p> <p>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/></p> <p>CASING/CEMENT JOB <input type="checkbox"/></p> <p>COMPLETION/TUBING INSTALL/DATE 1ST PRODUCED (DOFP) OTHER: <input checked="" type="checkbox"/></p>
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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.

Please be advised that the above mentioned well was completed as follows:

Rig Released: 11/01/18; Completion Began: 12/11/18; Frac Began: 02/15/18; Drillout Ended: 02/23/19; DOFP: 02/26/19
KOP @ 8,953'MD
14,731' TMD, 9,584' TVD & 14,643' PBD
Ran RBL/CBL/GR/CCL logs. Ran CBR & Caliper to Surface.
Frac Data: Perfs @ 10,140' to 14,592' (16 stages w/ Stage 1 @ Toe Sleeve Depth)
8,034,390 TL Fluid, 13,179,480 TL Proppant
2 7/8" Tubing installed 02/25/2019 @ depth of 9,640'MD and 4 1/2" AS-1X Packer @ 9,630'MD

Spud Date: 10/08/2018

Rig Release Date: 11/01/2018

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.ou,
email=LORRIKLINE@WPXENERGY.C
OM, c=US
Date: 2019.03.13 14:16:48 -0500' TITLE REGULATORY TECH II DATE 03/06/2019

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

For State Use Only

APPROVED BY: Haren Sharp TITLE Staff Mgr DATE 4-16-19
Conditions of Approval (if any):