Form 3160-5 (April 2004)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OM B No 1004-0137 Expires March 31, 2007

1	DEPARTMENT OF THE	INTERIOR	NMOCD AR		Expires March 31, 2007	
	BUREAU OF LAND MAN			NVINVI	1No 109694 Late	
Do not use t	' NOTICES AND REF his form for proposals t vell. Use Form 3160-3 ()	o drill or to re-	enter an		Allottee or Tribe Name	_
SUBMIT IN TRIPLICATE- Other instructions on reverse side.				7. If Unit or CA/Agreement, Name and/or No. NMNM109694 8 Well Name and No.		
Type of Well Oil Well □ □ Gas Well □ □ Other						
2 Name of Operator SandRidge Exploration and Production, LLC				State AZ 9 API Wel		_
3a Address 123 Robert S. Kerr Ave, Okla	shoma City, OK 73102	3b Phone No (inclu 405-429-5682	de area code)	3001529969 10. Field and Pool, or Exploratory Area		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				Grayburg, Jackson-SR-Q-G-SA		
UL: M, Sec. 16, T-17S, R-31E				11. County or Parish, State		
10 FSL 170 FML				Eddy, NM		
12. CHECK A	PPROPRIATE BOX(ES) TO	INDICATE NATU	RE OF NOTICE, R	EPORT, OR	OTHER DATA	
TYPE OF SUBMISSION		TY	PE OF ACTION			
Notice of Intent Subsequent Report	Acidize Deepen Production (Start/Resume) Water Shut-Off Alter Casing Fracture Treat Reclamation Well Integrity Casing Repair New Construction Recomplete ✓ Other Change of Operator					
Change Plans Plug and Abandon Temporarily At Convert to Injection Plug Back Water Disposal						_
following completion of the intesting has been completed. Find that the site is read SandRidge Exploration a SandRidge Exploration a SandRidge Exploration a The undersigned accepts thereof, as described below COM/Lease #: NMNM1 Wells: 3001529969 Legal Description of Lan Formations: Grayburg, BLM Bond #: NMB0005 Effective Date: January	and Production, LLC respectful and Production, LLC. all applicable terms, condition bw: 09694 d: Sec. 16, T-17S, R-31E Jackson, SR-Q-G-SA	results in a multiple confiled only after all requirely request a change of stipulations and re	pletion or recompletion rements, including reclan of operator from Fore strictions concerning	in a new interval mation, have beer est Oil Corp. fo operations on	, a Form 3160-4 shall be filed once a completed, and the operator has or the above referenced lease the leased land or portion	2
14 I hereby certify that the fo	egoing is true and correct			1 - 1	HPRAVET	<u> </u>
Name (Printed/Typed)	N. Qui	Title	Regulatory Manager	1 1	HOVLL	<i>)</i> 7
Signature	MUXXIL	Date		02/05/2010	FEB 1.2 2010	
\	THIS SPACE FOR	FEDERAL OR	STATE OFFICE	USE	KY	
Approved by			Title	BUREA	HOF LAND MANAGERAS	
Conditions of approval, if any, are certify that the applicant holds leg	e attached. Approval of this notice all or equitable title to those rights it		Office	<u> </u>	LOF LAND MANAGEME LSBAD FIELD OFFICE	. NT
which would entitle the applicant Title 18 U.S.C. Section 1001 and Ti States any false, fictitious or fraud	tle 43 U.S.C. Section 1212, make it a fullent statements or representations	a crime for any person as to any matter within	knowingly and willfully its jurisdiction	to make to any	department or agency of the Un	ited