

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. NMNM0555443
2. Name of Operator RKI EXPLORATION & PRODUCTION		6. If Indian, Allottee or Tribe Name
Contact: HEATHER BREHM E-Mail: Heather.Brehm@wpenergy.com		7. If Unit or CA/Agreement, Name and/or No. NMNM71027B
3a. Address 210 PARK AVENUE SUITE 700 OKLAHOMA CITY, OK 73102	3b. Phone No. (include area code) Ph: 539-573-7512	8. Well Name and No. ROSS DRAW UNIT 8
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 27 T26S R30E Mer NMP SWNE 1650FNL 1650FEL		9. API Well No. 30-015-23017
		10. Field and Pool, or Exploratory ROSS DRAW;WOLFCAMP
		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
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Drilling Operations
	<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 recompleat 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 recompleat 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.)

Recompletion activities began on 11/25/2015.
Test packer to 2000 psi. tested good.
Pressure tested plug & casing to 4000 psi. monitor pressure for 10 minutes, good test.
Pressure tested tubing to 5000 psi
12/9/15 perforate Wolfcamp C (11,558'-11,570') 72 Holes
12/11/15 acidize
12/12/15 Set packer @11,152' EOT @ 10,664', CIBP @ 11,215'
Pressure tested packer & casing to 2000 psi. held pressure good.

Pipeline failure occurred in Permian. Shut-ins and change of transporters in progress for large percentage of operating wells. Unable to frac the subject well at this time. Anticipate recompleat to resume by 3/1/2016.

Accepted for record
NMOCD
Pending BLM approvals will
subsequently be reviewed
and scanned
1/14/2016

14. I hereby certify that the foregoing is true and correct. Electronic Submission #328443 verified by the BLM Well Information System. For RKI EXPLORATION & PRODUCTION, sent to the Carlsbad	
Name (Printed/Typed) HEATHER BREHM	Title REGULATORY ANALYST
Signature (Electronic Submission)	Date 01/13/2016

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____	Date _____
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.

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

Additional data for EC transaction #328443 that would not fit on the form

32. Additional remarks, continued

Closed well in.