

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD Hobbs  
HOBBES OCD

FORM APPROVED  
OMB No. 1004-0135  
Expires: January 31, 2004

**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.

FEB 25 2013

RECEIVED

**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. NMLC069048
2. Name of Operator SandRidge Expl. & Prod., LLC		6. If Indian, Allottee or Tribe Name
3a. Address 123 Robert S. Kerr Ave, OKC, OK 73102	3b. Phone No. (include area code) 405-429-6518	7. If Unit or CA/Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 9-21S-38E - Battery Location		8. Well Name and No. Wylie 1 & 2, Elliott Fed 4
		9. API Well No. 025-07897, 07897 & 40487
		10. Field and Pool, or Exploratory Area Litman, San Andres & Wantz; Abo
		11. County or Parish, State Lea Co., NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 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 <b>CTB, Lease</b>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	<b>Commingle, off lease</b>
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	<b>storage &amp; measurem</b>

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 recomplete 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 recompletion 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.)

SandRidge Expl. & Prod., LLC request approval for a central tank battery, lease commingle, off lease storage & measurement for the following:

- |                       |                    |               |                 |                     |                     |
|-----------------------|--------------------|---------------|-----------------|---------------------|---------------------|
| 1. Wylie Federal #1   | API#: 30-025-07896 | Sec 9-21S-38E | Lease: LC069048 | Littman, San Andres | Royalty rate: 12.5% |
| 2. Wylie Federal #2   | API#: 30-025-07897 | Sec 9-21S-38E | Lease: LC069048 | Littman, San Andres | Royalty rate: 12.5% |
| 3. Elliott Federal #4 | API#: 30-025-40487 | Sec 9-21S-38E | Lease: LC069048 | Littman, San Andres | Royalty rate: 12.5% |

Please see attachments for complete detail regarding the procedures.

The working and royalty interest for all wells are uniform. All interested owners have been notified via certified mail.

**DENIED**

*No OCD order for surface commingle*

14. I hereby certify that the foregoing is true and correct

Name (Printed/Typed) Spence Laird Title Regulatory Analyst

Signature *Spence Laird* Date 09/10/2012

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved by *Denise Hobbs* Title UET Date 2/18/2013

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 Carlsbad

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.

(Instructions on page 2)

MAR 01 2013  
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MAR 04 2013