

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD-HOBBS

FORM APPROVED
OMB No. 1004-0137
Expires: January 31, 2018

HOBBS OCD
JAN 25 2016
RECEIVED

Lease Serial No. NMLC069052
6. If Indian, Allottee or Tribe Name

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 page 2

| | | |
|--|---|---|
| 1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other Injector | | 7. If Unit of CA/Agreement, Name and/or No. NMNM71057A |
| 2. Name of Operator RAM Energy LLC ✓ | | 8. Well Name and No. W. Dollarhide Queen Sand Unit #24 ✓ |
| 3a. Address 6100 E Skelly Dr, Suite 600 Tulsa, OK 74135 | 3b. Phone No. (include area code) (918) 621-6533 | 9. API Well No. 30-025-12276 ✓ |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 330' FNL & 1650' FEL Section 31 Twp 24S Rge 38E ✓ | | 10. Field and Pool or Exploratory Area Dollarhide Queen Sand |
| | | 11. Country or Parish, State Lea County, NM |

12. CHECK THE 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"/> Hydraulic Fracturing | <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 Remedial work | |
| | <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | | |
| | <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 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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

10/16/2015 MIRU

10/17/2015 Blow tbg and csg down. ND wellhead and release pkr. NU BOP. TOOH w/112 jts 2-3/8" J-55 4.7# tbg; one 2-3/8" SN and one 4-1/2" AD-1 nickel-plated pkr. No holes found. Packer rubber was damaged. PU & TIH w 4-1/2" AD-1 pkr, 2-3/8" SN, 112 jts 2-3/8" 4.7# tbg. Test all tbg to 7,000 psi. Did not find hold in tbg. Set pkr at 3,497'.

10/20/2015 MIRU pump truck. Pressure test csg to 700 psi. Held good for 30 min. Bled off pressure and release pkr. ND BOP and flange up wellhead. Circ 50 bbls 2% KCl water w/pkr fluid. Unflange wellhead and set pkr. Flange wellhead up. Pressure up on csg to 700 psi. Held good for 30 min. RD.

SUBJECT TO LIKE APPROVAL BY STATE

Submit record of charted annular pressure test.

| | | |
|--|--|-----------------------------------|
| 14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed) Connie Swan | | Regulatory Administrator Title |
| Signature <i>CSwan</i> | | Date 11/05/2015 |

THE SPACE FOR FEDERAL OR STATE OFFICE USE

| | |
|---|--------|
| Approved by | Title |
| 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 |

ACCEPTED FOR RECORD
11/05/2015
JAN 20 2016
Ph Swamy
BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD 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.

(Instructions on page 2)

FEB 01 2016