Submit 3 Copies To Appropriate District Office. State of New Mexico	Form C-103
Energy, Minerals and Natural Res	ources May 27, 2004 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II	20.045.20244
1301 W. Grand Ave, Artesia, NM 88210 OIL CONSERVATION DIVI	5 Indicate Type of Lease
District III 1220 South St. Francis Dr	STATE FEE
1000 Rio Brazos Rd, Aztec, NM 87410 District IV Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S St Francis Dr., Santa Fe, NM	0, 5,000 5,000 2,000 1,000
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACIDIFFERENT RESERVOIR USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH	
PROPOSALS)	CHASER & STATE
1. Type of Well: Oil Well Gas Well Other	8. Well Number 009
2. Name of Operator	9. OGRID Number
Cimarex Energy Co. of Colorado	162683
3. Address of Operator	10. Pool name or Wildcat
600 N. Marienfeld, Ste. 600; Midland, TX 79701	EMPIRE; GLORIETA-YESO
4. Well Location	
SHL Unit Letter G: 2310 feet from the North line and 1650 feet from the East line	
Section 8 Township 17S Range 29E NMPM County Eddy	
11. Elevation (Show whether DR, RKB,	
3615 GR	
Pit or Below-grade Tank Application □ or Closure □	
Pit type Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water	
Pit Liner Thickness: Below-Grade Tank: Volume bbls; Construction Material	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING	
<u> </u>	MENCE DRILLING OPNS P AND A
	NG/CEMENT JOB
OTHER: Request Permit Extension 🖾 OTHE	ER:
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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or	
recompletion.	
The APD for this well is due to expire on 10-12-12. Cimarex respectfully requests an extension due to rig scheduling.	
EXTENSION GRANTED. NEW /	(Inc.)
EXPIRATION DATE 10/14/2013	RECEIVED
/ /	
	SEP 2 1 2012
	NMOCD ARTESIA
I hereby certify that the information above is true and complete to the best of m	w knowledge and belief. I further certify that any nit or below-
grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan.	
SIGNATURE SIGNATURE Regulator	ory Admin Assistant DATE September 20, 2012
The second secon	
	er@cimarex.com Telephone No. 432-620-1960
For State Use Only	
APPROVED BY: / SILYMAN TITLE GOVERNST DATE 1/2/2012	
Conditions of Approval (if any):	