Submit 3 Copies To Appropriate District Office <u>District I</u>	State of New Mexico Energy, Minerals and Natural Resources OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505		Form C-103 May 27, 2004 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210 <u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM 87505			30-015-38330 5. Indicate Type of Lease STATE FEE 6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: Oil Well A Gas Well Other			 7. Lease Name or Unit Agreement Name MARACAS 22 STATE 8. Well Number 007
2. Name of Operator Cimarex Energy Co. of Colorado			9. OGRID Number 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 H : 2075 feet from the North line and 990 feet from the East line			
Section 22 Township 17S Range 28E NMPM County Eddy 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3587' GR 3587' GR 4400000000000000000000000000000000000			
Pit type Depth to GroundwaterDistance from nearest fresh water wellDistance from nearest surface water			
it Liner Thickness:Below-Grade Tank: Volumebbls; Construction Material			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
		SEQUENT REPORT OF:	
	PLUG AND ABANDON CHANGE PLANS MULTIPLE COMPL	REMEDIAL WOR COMMENCE DRI CASING/CEMEN	LLING OPNS 🔲 P AND A
OTHER:	Request Permit Extension		
 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 12-27-12. Cimarex respectfully requests an extension due to rig scheduling.

EXTENSION GRANTED. NEW EXPIRATION DATE <u>12-27-13</u>

NOV 28 2012 NMOCD ARTESIA I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or belowgrade tank has been/will be constructed or closed according to NMOCD guidelines [], a general permit [] or an (attached) alternative OCD-approved plan []. SIGNATURE 1/ iv TITLE **Regulatory Admin Assistant** DATE November 27, 2012 **Chloe Alexander** email address: cdalexander@cimarex.com Telephone No. 432-620-1960 Type or print name_ For State Use Only APPROVED BY: TITLE DATE Conditions of Approval (if any):

RECEIVED