(August 2007)		UNITED STATES	S NTERIOR GEMENT	OCD-ARTI	SIA FORM Expires:	APPROVED O. 1004-0135 July 31, 2010	
,	SUNDRY I	BUREAU OF LAND MANAGEMENT SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter			5. Lease Serial No. NMLC064200		
·	abandoned well. Use form 3160-3 (APD) for such proposals.				6. If Indian, Allottee or Tribe Name		
	SUBMIT IN TRIF	7. If Unit or CA/Agree NMNM94519	ement, Name and/or No				
1. Type of Well Gas Well Other					8. Well Name and No. BLACK RIVER FED 1		
2. Name of Operator Contact: AMITHY E CRAWFORD CIMAREX ENERGY COMPANY OF CO-Mail: acrawford@cimarex.com					9. API Well No. 30-015-29018-00-S1		
3a. Address 202 S CHEYENNE AVE SUITE 1000 TULSA, OK 74103.4346			3b. Phone No. (include area code) Ph: 432-620-1909		10. Field and Pool, or Exploratory S CARLSBAD		
		, R., M., or Survey Description) /		11. County or Parish,	and State	
Sec 10 T24	S R26E SWNW 13	30FNL 990FWL		EDDY COUNT		Ϋ́, NM	
	12. CHECK APPF	ROPRIATE BOX(ES) TO	D INDICATE NATURE	E OF NOTICE, R	EPORT, OR OTHE	R DATA	
TYPE OF S	SUBMISSION	MISSION TYPE OF ACTION					
☐ Notice of i	Intent	🗖 Acidize	Deepen		tion (Start/Resume)	□ Water Shut-Off	
—		Alter Casing	Fracture Treat	🗖 Reclam	ation	Well Integrity	
🛛 Subsequer	-	Casing Repair	New Construction	_	•	Other Site Facility Diag	
🔲 Final Aba	ndonment Notice	Change Plans Convert to Injection	Plug and Aband Plug Back	lon 🔲 Tempo 🗋 Water I	arity Adandon m/Security Pla		
testing has bee determined that	en completed. Final Ab at the site is ready for fi	operations. If the operation re andonment Notices shall be fil nal inspection.) ity Diagram for the Black	ed only after all requirements	, including reclamatio	on, have been completed,	and the operator has	
		NM OIL	CONSERVATION	A anostad fo	r Rosand Burnos		
• •		AR	TESIA DISTRICT Approval		or Record Purposes. Subject to Onsite Inspection.		
		M	AR 1 4 2016	Date:	·_ ·		
			4N FT 700K				
			AN 1 7 2016	6	Zande On	atr	
				<i>C</i>	Zynde Om	at	
14. I hereby certi	ify that the foregoing is	true and correct. Electronic Submission # For CIMAREX ENE	ECEIVED	M Well Informatio	bad	st-	
14. I hereby certi Name (Printed	Co	true and correct. Electronic Submission # For CIMAREX ENE mmitted to AFMSS for pro	SECEIVED 322728 verified by the BL ERGY COMPANY OF CO, beessing by CATHY QUE	M Well Informatio	oad 16CQ0017SE)	str-	
	Co	true and correct. Electronic Submission # For CIMAREX ENE mmitted to AFMSS for pro	SECEIVED 322728 verified by the BL ERGY COMPANY OF CO, beessing by CATHY QUE	M Well Informatio sent to the Carlsb EN on 11/16/2015 (oad 16CQ0017SE)	str.	
	Co	true and correct. Electronic Submission # For CIMAREX ENE mmitted to AFMSS for pro	ECEIVED 322728 verified by the BL ERGY COMPANY OF CO, pressing by CATHY QUE Title R Date 1	M Well Informatio sent to the Carlst EN on 11/16/2015 (EGULATORY AN 1/06/2015	nad 16CQ0017SE) IALYST		
Name (Printed	Co WTyped) AMITHY E	true and correct. Electronic Submission # For CIMAREX ENE mmitted to AFMSS for pro	SECEIVED 322728 verified by the BL RGY COMPANY OF CO, beessing by CATHY QUE Title R	M Well Informatio sent to the Carlst EN on 11/16/2015 (EGULATORY AN 1/06/2015	nad 16CQ0017SE) IALYST		
Name (Printed	Co WTyped) AMITHY E	true and correct. Electronic Submission # For CIMAREX ENE mmitted to AFMSS for pro	ECEIVED 322728 verified by the BL ERGY COMPANY OF CO, pressing by CATHY QUE Title R Date 1	M Well Informatio sent to the Carlst EN on 11/16/2015 (EGULATORY AN 1/06/2015	nad 16CQ0017SE) IALYST	Date	
Name (Printed Signature Approved By Conditions of appro- certify that the appl	Co (/Typed) AMITHY E (Electronic S	true and correct. Electronic Submission # For CIMAREX ENE mmitted to AFMSS for pro C Submission) THIS SPACE FO d. Approval of this notice does itable title to those rights in the	ECEIVED 322728 verified by the BL ERGY COMPANY OF CO, pressing by CATHY QUER Title R Date 1 DR FEDERAL OR ST Title	M Well Informatio sent to the Carlst EN on 11/16/2015 (EGULATORY AN 1/06/2015	nad 16CQ0017SE) IALYST	Date	

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