

District I - (575) 393-6161  
1625 N French Dr, Hobbs, NM 88240  
District II - (575) 748-1283  
811 S First St, Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Rd, Aztec, NM 87410  
District IV - (505) 476-3460  
1220 S St Francis Dr, Santa Fe, NM 87505

RECEIVED

AUG 02 2011

DISTRICT IV ARTESIA O.C.D.

Energy, Minerals and Natural Resources

CONSERVATION DIVISION

1220 South St Francis Dr

Santa Fe, NM 87505

Revised August 1, 2011

|   |       |       |
|---|-------|-------|
| WELL API NO<br>30-015-20357                       |       |       |
| 5 Indicate Type of Lease                          | STATE | FEE X |
| 6 State Oil & Gas Lease No                        |       |       |
| 7 Lease Name or Unit Agreement Name<br>ECHOLS     |       |       |
| 8 Well Number<br>#001                             |       |       |
| 9 OGRID Number<br>215099                          |       |       |
| 10 Pool name or Wildcat<br>SOUTH CARLSBAD, MORROW |       |       |

**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 Gas Well X Other

2 Name of Operator  
CIMAREX ENERGY CO

3 Address of Operator  
600 N MARIENFELD, SUITE 600, MIDLAND, TEXAS

4 Well Location  
Unit Letter J 1980 feet from the SOUTH line and 1980 feet from the EAST line  
Section 12 Township 23S Range 26E NMPM EDDY County

11 Elevation (Show whether DR, RKB, RT, GR, etc )  
3,233' - GR

12 Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

|  |  |   |  |
|--|--|---|--|
| <b>NOTICE OF INTENTION TO</b><br>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON<br>TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/><br>PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/><br>DOWNHOLE COMMINGLE <input type="checkbox"/> |  | <b>SUBSEQUENT REPORT OF</b><br>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/><br>COMMENCE DRILLING OPNS <input type="checkbox"/> P AND A X<br>CASING/CEMENT JOB <input type="checkbox"/> |  |
| OTHER <input type="checkbox"/>   |  | OTHER WELL PLUGGED AND ABANDONED 07/30/19   |  |

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 19 15 7 14 NMAC For Multiple Completions Attach wellbore diagram of proposed completion or recompletion

07/27/19 SET 4-1/2" CIBP @ 2,385' (PER OCD), CIRC WELL W/ M L F, PUMP 85 SXS CMT @ 2,385'-1,583'  
 07/28/19 PERF X SQZ 55 SXS CMT @ 890', WOC X TAG CMT PLUG @ 760', PERF SQZ HOLES @ 438', ATTEMPT TO EST INJ RATE - PRES UP TO 750# X HOLD  
 07/29/19 PUMP 25 SXS CMT @ 488' (PER OCD), WOC X TAG CMT PLUG @ 120', PERF SQZ HOLES @ 63', ATTEMPT TO EST INJ RATE - PRES UP TO 800# X HOLD, MIX X CIRC TO SURF 20 SXS CMT @ 120'-3' (PER OCD)  
 07/30/19 DIG OUT X CUT OFF WELLHEAD 3' B G L, WELD ON STEEL PLATE TO CSGS X INSTALL DRY HOLE MARKER

|                         |   |                         |
|-------------------------|---|-------------------------|
| MIRU PXA EQUIP 07/27/19 | Approved for plugging of well bore only<br>Liability under bond is retained pending receipt of C-103 (Subsequent Report of Well Plugging)<br>which may be found at OCD Web Page under Form www.ernr.state.nm.us/oed | EDMO PXA EQUIP 07/30/19 |
|-------------------------|---|-------------------------|

I hereby certify that the information above is true and complete to the best of my knowledge and belief

SIGNATURE David A Eyler TITLE AGENT DATE 07/30/19

Type or print name DAVID A EYLER E-mail address DEYLER@MILAGRO-RES.COM PHONE 432 687 3033

**For State Use Only**

APPROVED BY [Signature] TITLE Staff Mgr DATE 8/6/19

Conditions of Approval (if any)