

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Carlsbad Field Office

FORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010**SUNDRY NOTICES AND REPORTS ON WELL 1**  
**Do not use this form for proposals to drill or to recomplete an abandoned well. Use form 3160-3 (APD) for such proposals.**5. Lease Serial No.  
NMNM86154

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**1. Type of Well ☒☒ Oil Well ☐ Gas Well ☐ Other8. Well Name and No.  
TRISTE DRAW 25 FED COM 8H ☒2. Name of Operator  
CIMAREX ENERGY COMPANY OF COContact: ARICKA EASTERLING  
E-Mail: aeasterling@cimarex.com9. API Well No.  
30-025-42102-00-X1 ☒3a. Address  
202 S CHEYENNE AVE. SUITE 1000  
TULSA, OK 741033b. Phone No. (include area code)  
Ph: 918-560-706010. Field and Pool, or Exploratory  
TRISTE DRAW

HOBBS OCD

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 25 T23S R32E SWSW 330FSL 1310FWL ☒  
32.269353 N Lat, 103.632638 W Lon

APR 21 2016

11. County or Parish, and State  
LEA COUNTY, NM

## 12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<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
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Change to Original A
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	PD

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 recompleat 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 shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

The permit for this well is due to expire 8/21/16. Cimarex respectfully requests a 2 year permit extension due to rig scheduling.

APPROVED FOR 24 MONTH PERIOD  
ENDING 8/22/2018

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #332275 verified by the BLM Well Information System  
For CIMAREX ENERGY COMPANY OF CO, sent to the Hobbs  
Committed to AFMSS for processing by PRISCILLA PEREZ on 03/04/2016 (16PP0383SE)

Name (Printed/Typed) ARICKA EASTERLING

Title REGULATORY ANALYST

Signature (Electronic Submission)

Date 02/25/2016

## THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

J. D. Whitford

Title

LRET

Date

4/14/16

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 CFO

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.

\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\*

APR 28 2016