

Submit 1 Copy To Appropriate District Office
 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

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised July 18, 2013

HOBBS OGD
JAN 25 2017
RECEIVED

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

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| 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.) | | WELL API NO. 30025-43506 |
| 1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> | | 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 2. Name of Operator Cimarex Energy Co. | | 6. State Oil & Gas Lease No. |
| 3. Address of Operator 202 S. Cheyenne Ave, Ste 1000, Tulsa OK 74103 | | 7. Lease Name or Unit Agreement Name Tres Equis State |
| 4. Well Location Unit Letter <u>2</u> : <u>300</u> feet from the <u>North</u> line and <u>2020</u> feet from the <u>East</u> line Section <u>6</u> Township <u>24S</u> Range <u>33E</u> NMPM Lea County | | 8. Well Number <u>6H</u> |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3647 | | 9. OGRID Number <u>215099</u> |
| 10. Pool name or Wildcat Triple X Bone Spring West | | |

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

| | | | |
|--|--|--|--|
| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | |
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | CHANGE PLANS <input checked="" type="checkbox"/> | COMMENCE DRILLING OPNS. <input type="checkbox"/> | P AND A <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | MULTIPLE COMPL <input type="checkbox"/> | CASING/CEMENT JOB <input type="checkbox"/> | |
| DOWNHOLE COMMINGLE <input type="checkbox"/> | | | |
| CLOSED-LOOP SYSTEM <input type="checkbox"/> | | | |
| OTHER: <input type="checkbox"/> | | OTHER: <input type="checkbox"/> | |

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.

Cimarex respectfully requests approval to change the intermediate casing as follows for the Tres Equis State #6H well:
 12-1/4" hole, 9-5/8", 40# L-80, LTC casing set @ 4990'. TOC - Circ to surf.
 No other changes to drill permit.

Spud Date: Rig Release Date:

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

SIGNATURE [Signature] TITLE Regulatory DATE 1-25-17

Type or print name Terri Stathem E-mail address: Tstathem@cimarex.com PHONE: 432-620-1936
For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 01/26/17
 Conditions of Approval (if any):