

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

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

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|---|
| WELL API NO. 30-025-43736 |
| 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No. |
| 7. Lease Name or Unit Agreement Name coriander AOC 1-12 State |
| 8. Well Number 1H |
| 9. OGRID Number 215099 |
| 10. Pool name or Wildcat Diamondtail Bone Spring |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3749 |

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 Other

2. Name of Operator
Cimarex Energy Co.

3. Address of Operator
202 S. Cheyenne Ave., Suite 1000, Tulsa OK 74103

4. Well Location
 Unit Letter 1 : 390' feet from the NORTH line and 590' feet from the EAST line
 Section 1 23S Township 32E Range NMPM Lea County

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 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: Completion <input checked="" 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.

9/26/2017- Test Well to 9900 psi for 30 min. Good Test.

9/26 to 12/19- Perf Avalon Shale from 18976'-9470'. .43, 1600 shots. Frac with 17205318 gal frac fluid and 19769975 lbs sand.

12/31/2017- Mill out plugs and CO to PBTD @19001'. Flowback Well.

3 /20/2017- RIH with 2 7/8" tubing and GLVs set at 8975' RTP.

Spud Date: 8/1/2017

Rig Release Date: 9/10/2017

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

SIGNATURE Amithy Crawford TITLE Regulatory Analyst DATE 4/13/2018

Type or print name Amithy Crawford E-mail address: acrawford@cimarex.com PHONE: 432-620-1909

For State Use Only

APPROVED BY Karen Smarp TITLE Staff Mgr. DATE 4-16-18
 Conditions of Approval (if any):