| Submit 1 Copy To Appropriate District Office District 1 – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 District 11 – (575) 748-1283 811 S. First St., Artesia, NM 88210 JUL 2 4 2013 CONSERVATION DIVISION District 11 – (505) 334-6178 1000 Rio Brazos Rd., Aztee, NM 87410 District 1V – (505) 476-3460 District 1V – (505) 47 | | Form C-103 |
|--|----------|---|
| | | Revised August 1, 2011 WELL API NO. |
| | | |
| | | 30-025- |
| | | 5. Indicate Type of Lease STATE FEE |
| 1220 S. St. Francis Dr., Santa Fe, NM | | 6. State Oil & Gas Lease No. |
| 87505 | | |
| SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A | | Lease Name or Unit Agreement Name James Federal |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH | | 8. Well Number |
| PROPOSALS.) 1. Type of Well: Oil Well 🖾 Gas Well 🗌 Other 🗌 | | 21H |
| 2. Name of Operator | | 9. OGRID Number |
| Cimarex Energy Co. of Colorado | | 162683 |
| 3. Address of Operator | | 10. Pool name or Wildcat |
| 600 N. Marienfeld Street, Suite 600; Midland, TX 79701 | | Wildcat Bone Spring |
| 4. Well Location | | |
| Unit Letter <u>B</u> : <u>185</u> feet from the <u>North</u> line and <u>1980</u> feet from the <u>East</u> line | | |
| Section 29 Township 23S Range 32E NMPM LEA County | | |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3689' GR | | |
| | | |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data | | |
| NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: | | |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK | | |
| TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRI | | |
| PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMEN | | JOB 🗌 |
| | | |
| OTHER: Drilled with Closed Loop System 🛛 OTHER: | | |
| 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. | | |
| proposed completion of recompletion. | | |
| | | |
| During this procedure we plan to use the Closed Loop Pit. | | |
| | | |
| | | |
| Spud Date: Rig Release Date: | : | |
| | <u> </u> | |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. | | |
| | | |
| SIGNATURE CALOU COMPAREMENTITLE Regulatory Admin Assistant DATE 07/24/2013 | | |
| Type or print name <u>Chloe Alexander</u> E-mail addr <u>ess: cdalexander@cimarex.com</u> PHONE: <u>432-620-1938</u> | | |
| For State Use Only | | |
| APPROVED BY: | | |
| Conditions of Approval (if any): | | |
| | | |

NOV 2 1 2013

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