| Submit 1 Copy To Appropriate District  State of New   | w Mexico                  | Form C-103                           |
|---|---------------------------|--------------------------------------|
| Office District I – (575) 393-6161 Energy, Minerals and Natural Resources   |                           | Revised July 18, 2013                |
| 1625 N. French Dr., Hobbs, NM 88240 HOBBS OCD  District II – (575) 748-1283 811 S. First St., Artesia, NM 88210  OIL CONSERVATION DIVISION          |                           | WELL API NO.<br>30-025-406/1 10 しん   |
|   |                           | 5. Indicate Type of Lease            |
| 811 S. First St., Artesia, NM 88210  District III – (505) 334-6178  1000 Rio Brazos Rd., Aztec, NM 87410  Santa Fe. NM 87505                        |                           | STATE STATE FEE                      |
| <u>District IV</u> = (303) 470-3400   |                           | 6. State Oil & Gas Lease No.         |
| 1220 S. St. Francis Dr., Santa Fe, NM<br>87505 RECEIVED   |                           |                                      |
| SUNDRY NOTICES AND REPORTS ON WELLS   |                           | 7. Lease Name or Unit Agreement Name |
| (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 |                           | Tres Equis State                     |
| PROPOSALS.)   |                           | 8. Well Number                       |
| 1. Type of Well: Oil Well Gas Well Other  |                           | 012                                  |
| 2. Name of Operator   |                           | 9. OGRID Number                      |
| Cimarex Energy Co.  3. Address of Operator  |                           | 215099  10. Pool name or Wildcat     |
| 600 N. Marienfeld, Midland, TX 79701, Suite 600   |                           | TRIPLE X;BONE SPRING, WEST           |
| 4. Well Location  |                           |                                      |
| Unit Letter A: 330 feet from the North line and 990 feet from the East line   |                           |                                      |
|   | 24S Range 33E             | NMPM Lea County                      |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)  |                           |                                      |
| 3645' GL  |                           |                                      |
|   |                           |                                      |
| 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 WOR            | K ☐ ALTERING CASING ☐                |
| TEMPORARILY ABANDON   | -                         | <del></del>                          |
| PULL OR ALTER CASING   MULTIPLE COMPL   | CASING/CEMEN              | ΓJOB □                               |
| DOWNHOLE COMMINGLE  |                           |                                      |
| CLOSED-LOOP SYSTEM Request permit extension   | OTHER:                    | П                                    |
| 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.  |                           |                                      |
| ,   |                           | ,                                    |
|   |                           |                                      |
| The permit for this well is due to expire on 7/2/14. Cimarex respectfully requests an extension due to rig scheduling.                              |                           |                                      |
|   |                           | :                                    |
|   |                           | :                                    |
|   |                           |                                      |
| •   |                           |                                      |
|   | $\sim$                    |                                      |
|   | 610                       | : - ac 7/20/2015                     |
|   | ~XV                       | ires 7/02/2015                       |
| I hereby certify that the information above is true and complete to   | o the best of my knowledg | e and belief.                        |
| $\Omega a = a$  |                           |                                      |
| SIGNATURE WISC WARM TITLE Regulatory  | Admin Assistant[          | DATE <u>2/3/14</u>                   |
|   |                           |                                      |
| Type or print name <u>Chloe Alexander</u> E-mail address:   | cdalexander@cimarex.c     | om : PHONE:432-620-1938_             |
| For State Use Only Petroleum Engineer   |                           |                                      |
| APPROVED BY: TITLE  |                           | DATE FEB 1 0 2014                    |
| Conditions of Approval (if any):  |                           |                                      |
|   |                           | /                                    |