| Submit 1 Copy To Appropriate District<br>Office   | State of New Mexico   |                   | Form C-103<br>Revised July 18, 2013  |
|---|---|-------------------|--|
| <u>District 1</u> – (575) 393-6161<br>1625 N. French Dr., Hobbs, NM 88240   | Energy, Minerals and Natural Resources  |                   | WELL API NO.   |
| <u>District II</u> – (575) 748-1283<br>811 S. First St., Artesia, NM 88210  | OIL CONSERVATION DIVISION<br>1220 South St. Francis Dr.<br>Santa Fe, NM 87505 |                   | 30-025-43737<br>5. Indicate Type of Lease                                  |
| <u>District III</u> – (505) 334-6178<br>1000 Rio Brazos Rd., Aztec, NM 87410  |   |                   | STATE 🔽 FEE 🗌  |
| <u>District IV</u> – (505) 476-3460<br>1220 S. St. Francis Dr., Santa Fe, NM<br>87505   | Sunta 1 9, 1411 07505   |                   | <ol> <li>6. State Oil &amp; Gas Lease No.</li> <li>V0-4297-0002</li> </ol> |
| 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<br>DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH<br>PROPOSALS.) |   |                   | Coriander AOC 1-12 state   |
| 1. Type of Well: Oil Well   | Gas Well 🗌 Other  | 8. Well Number 2H |  |
| 2. Name of Operator<br>Cimarex Energy Co.   |   |                   | 9. OGRID Number<br>215099  |
| 3. Address of Operator<br>600 N. Marienfeld St., Suite 600 Midland, TX 79701  |   |                   | 10. Pool name or Wildcat<br>Diamondtail; Bone Spring (17644)               |
| 4. Well Location  |   |                   |  |
| Unit Letter A : 330 feet from the North line and 710 feet from the East line  |   |                   |  |
| Section 01 Township 23S Range 32E NMPM County Lea   |   |                   |  |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>3751' GR  |   |                   |  |
|   |   |                   |  |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data  |   |                   |  |
| NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:   |   |                   |  |
|   |   |                   |  |
| TEMPORARILY ABANDON   |   | CASING/CEMENT     |  |
| DOWNHOLE COMMINGLE  |   |                   | _  |
| 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.                   |   |                   |  |
| Cimarex respectfully requests to change the BHL & casing as follows:  |   |                   |  |
| Original BHL: 330' FSL & 660' FEL   |   |                   |  |
| Proposed BHL: 100' FSL & 660' FEL   |   |                   |  |
| Original casing:  |   |                   |  |
| Run 9-5/8" 12.25 40# 4790' Lead: 932 sxs 10.2 ppg 1.88 yield, Tail: 291 sxs 10.2 ppg 1.34 yield   |   |                   |  |
| Run 5-1/2" 8.75 17# 18,870' Lead:213 sxs 9.2 ppg 6.18 yield, Tail: 2097 sxs 9.2 ppg 1.30 yield<br>Proposed casing:  |   |                   |  |
| Run 9-5/8" 13.375 48# 1300' 798 sxs 14.8 ppg 1.33 yield   |   |                   |  |
| Run tapered string 7" 29# P110MS LTC x 5.5" 20# P110 CY BTC surface to 19656' w/ XO at 8248'<br>Lead : 400 sxs 10.5 ppg 3.51 yield Tail: 1620 sxs 14.5 ppg 1.24 yield |   |                   |  |
|   |   |                   |  |
| Spud Date:  | Rig Release Da  | ite:              |  |
| <u></u>   |   | <b>.</b>          |  |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief.  |   |                   |  |
|   |   |                   |  |
| SIGNATURE   | TITLE Regula  | atory Analyst     | DATE 07/30/2018  |
| Type or print name Fatima Vasqu   | E-mail address  | : fvasquez@cima   | rex.com PHONE: (432) 620-1933  |
| For State Use Only  |   |                   |  |
| APPROVED BY:  |   |                   |  |
| Conditions of Approval (it any):  |   |                   |  |
| L   | -   |                   |  |