

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
CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505
HOBBS OGD
FEB 10 2014
RECEIVED

Form C-103
Revised July 18, 2013

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. 30-025-40674
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" 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 600 N. Marienfeld, Midland, TX 79701, Suite 600		7. Lease Name or Unit Agreement Name Tres Equis State
4. Well Location Unit Letter <u>D</u> : <u>330</u> feet from the <u>North</u> line and <u>990</u> feet from the <u>West</u> line Section <u>6</u> Township <u>24S</u> Range <u>33E</u> NMPM Lea County		8. Well Number 007
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3645' GL		9. OGRID Number 215099
		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 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: Request permit extension <input checked="" 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.

The permit for this well is due to expire on 7/6/14. Cimarex respectfully requests an extension due to rig scheduling.

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

SIGNATURE Chloe Alexander TITLE Regulatory Admin Assistant DATE 2/3/14

Type or print name Chloe Alexander E-mail address: cdalexander@cimarex.com PHONE: 432-620-1938

For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE FEB 10 2014

Conditions of Approval (if any):

FEB 10 2014