

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

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. 30-025-41609
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input 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 202 S. Cheyenne Ave, Suite 1000, Tulsa, OK 74103		7. Lease Name or Unit Agreement Name Witherspoon 23 State
4. Well Location Unit Letter <u>A</u> : <u>330</u> feet from the <u>North</u> line and <u>660</u> feet from the <u>East</u> line Section <u>23</u> Township <u>21S</u> Range <u>33E</u> NMPM Lea County		8. Well Number 4H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3780' GR		9. OGRID Number 215099
		10. Pool name or Wildcat Wildcat-G-03 S252636M; Bone Spring

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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
DOWNHOLE COMMINGLE <input type="checkbox"/>	P AND A <input type="checkbox"/>
CLOSED-LOOP SYSTEM <input type="checkbox"/>	CASING/CEMENT JOB <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.

Completion:

5/7/14 Test Casing to 8500# for 30 min. Good Test. TOC @ 3300'.
5/16/14 to 5/24/14 Perf Avalon Shale @ 9415-13400, 672 holes. Frac w/ 5,854,170 gal of total fluid & 4,748,986 # sand.
5/25/14 Mill plugs 1-17. Wash to @ 13400'. Flow well. PBTD @ 13426'.
5/29/14 RIH w/ 2 3/8" tubing & GLV's, Set @ 9029. GLV's @ 2119, 3256, 3974, 4464, 5019, 5509, 5999, 6521, 7012, 7502, 8024, 8514, 9037.
5/30/14 Turn well to production

Spud Date: 2/19/14
Rig Release Date: 4/23/14

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

SIGNATURE Aricka Easterling TITLE Regulatory Analyst DATE 7/2/2014

Type or print name Aricka Easterling E-mail address: aeasterling@cimarex.com PHONE: 918-560-7060
For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 07/15/14
Conditions of Approval (if any): JUL 16 2014