

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010**SUNDRY NOTICES AND REPORTS ON WELLS** **NMOCD**
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals. **Hobbs****SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

5. Lease Serial No. NMNM01917
6. If Indian, Allottee or Tribe Name
7. If Unit or CA/Agreement, Name and/or No. NMNM135092
8. Well Name and No. DOS EQUIS 12 FEDERAL COM 1
9. API Well No. 30-025-40700-00-S1
10. Field and Pool, or Exploratory TRIPLE X
11. County or Parish, and State LEA COUNTY, NM

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	
2. Name of Operator CIMAREX ENERGY COMPANY OF CO	
Contact: KIMBERLEIGH RHODES E-Mail: KiRhodes@cimarex.com	
3a. Address 202 S CHEYENNE AVE. SUITE 1000 TULSA, OK 74103	3b. Phone No. (include area code) Ph: 918.560.7081
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 12 T24S R32E NENE 330FNL 810FEL	

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

Cimarex Energy Co. flared the following volumes from January thru April 2016 at the Dos Equis 12 Federal Com #1 battery. The following wells sale gas at the facility:

Lease	Well Name/No.	API #	Location
NMNM01917	Dos Equis 12 Federal Com 1H	3002540700	330 FNL 810 FEL ✓
NMNM01917	Dos Equis 12 Federal Com 2H	3002540791	330 FNL 1980 FEL ✓
NMNM02889	Dos Equis 12 Federal Com 3H	3002540792	330 FNL 1980 FWL ✓
NMNM02889	Dos Equis 12 Federal Com 4H	3002540793	330 FNL 660 FWL ✓

All Wells in Sec 12 T24S R32E

January 2016 - 1088 MCF
February 2016 - 372 MCF
March 2016 - 2488 MCF

HOBBS OCD

JUL 06 2016

RECEIVED

14. I hereby certify that the foregoing is true and correct. Electronic Submission #341163 verified by the BLM Well Information System For CIMAREX ENERGY COMPANY OF CO, sent to the Hobbs Committed to AFMSS for processing by PRISCILLA PEREZ on 06/07/2016 (16PP0741SE)	
Name (Printed/Typed) KIMBERLEIGH RHODES	Title REGULATORY TECHNICIAN
Signature (Electronic Submission)	Date 06/06/2016
THIS SPACE FOR FEDERAL OR STATE OFFICE USE	
Approved By _____	Title _____
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	Office _____

ACCEPTED FOR RECORD
JUN 27 2016
BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ******Accepted for Record Only**

MRS/OCD 7/9/2016

Additional data for EC transaction #341163 that would not fit on the form

32. Additional remarks, continued

April 2016 - 5434 MCF