

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720

District II
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720

District III
1000 Rio Brazos Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170

District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico
Energy Minerals and Natural Resources
Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-101
Revised July 18, 2013

☐ AMENDED REPORT

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK OR ADD A ZONE

¹ Operator Name and Address Cimarex Energy Co of Colorado 202 S. Cheyenne Ave., Suite 1000 Tulsa OK 74103		² OGRID Number 162683
³ API Number 30-025-34508		⁴ Well No. 1
⁵ Property Code 23645	⁶ Property Name Zafiro State 32 Com	

7. Surface Location

UL - Lot	Section	Township	Range	Lot Idn	Feet from	N/S Line	Feet From	E/W Line	County
G	32	18S	34E		2310'	North	1980'	East	Lea

8. Proposed Bottom Hole Location

UL - Lot	Section	Township	Range	Lot Idn	Feet from	N/S Line	Feet From	E/W Line	County

9. Pool Information

¹⁰ Pool Name Apache Ridge Bone Spring	¹¹ Pool Code 2260 21650
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Additional Well Information

¹² Work Type Plugback/RC	¹³ Well Type Gas	¹⁴ Cable/Rotary	¹⁵ Lease Type State	¹⁶ Ground Level Elevation 3901'
¹⁷ Multiple N	¹⁸ Proposed Depth PBSD 13310'	¹⁹ Formation Bone Spring	²⁰ Contractor	²¹ Spud Date
Depth to Ground water 300	Distance from nearest fresh water well	Distance to nearest surface water		

☐ We will be using a closed-loop system in lieu of lined pits

21. Proposed Casing and Cement Program

Type	Hole Size	Casing Size	Casing Weight/ft	Setting Depth	Sacks of Cement	Estimated TOC
Surface	17 1/2"	13 3/8"	48#	433'	200 sks	Surface
Intermediate	11"	8 5/8"	32#	4000'	1370 sks	Surface
Production	7 7/8"	5 1/2"	17#	13650'	900 Sks	4200' calc

Casing/Cement Program: Additional Comments

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22. Proposed Blowout Prevention Program

Type	Working Pressure	Test Pressure	Manufacturer

²³ I hereby certify that the information given above is true and complete to the best of my knowledge and belief.
I further certify that I have complied with 19.15.14.9 (A) NMAC ☒ and/or 19.15.14.9 (B) NMAC ☒ if applicable.
Signature: *Amithy Crawford*

Printed name: Amithy Crawford

Title: Regulatory Analyst

E-mail Address: Acrawford@cimarex.com

Date: 5/25/2017

Phone: 432-620-1909

OIL CONSERVATION DIVISION

Approved By: *[Signature]*

Title:

Petroleum Engineer

Approved Date: 06/28/17

Expiration Date: 06/28/19

Conditions of Approval Attached