Form 3160-5 (June 2015)

UNITED STATES
DEPARTMENT OF THE INTERIOR HOBBS
BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB NO. 1004-0137 Expires: January 31, 2018

3.	Lease Schal	INO.
	NMLC061	873B

SUNDRY	NMLC061873B						
Do not use this abandoned well	6. If Indian, Allottee or Tribe Name						
SUBMIT IN T	7. If Unit or CA/Agreement, Name and/or No.						
1. Type of Well ☑ Oil Well ☐ Gas Well ☐ Other	Well Name and No. COTTON DRAW 9L FEDERAL 4H						
Name of Operator CIMAREX ENERGY COMPAN	9. API Well No. 30-025-43836						
3a. Address 202 S CHEYENNE AVE TULSA, OK 74103	3b. Phone No. (include area code) Ph: 432-620-1936			10. Field and Pool or Exploratory Area BONE SPRING			
4. Location of Well (Footage, Sec., T.,	9			11. County or Parish, State			
Sec 9 T25S R32E SWSW 459				LEA COUNTY, NM			
12. CHECK THE AP	PROPRIATE BOX(ES)	TO INDICA	TE NATURE O	OF NOTICE,	REPORT, OR OTH	IER DATA	
TYPE OF SUBMISSION TYPE OF ACTION							
Notice of Intent	☐ Acidize	☐ Dee	pen	☐ Producti	on (Start/Resume)	■ Water Shut-Off	
☐ Notice of Intent	☐ Alter Casing	☐ Hyd	draulic Fracturing Reclamation		ation	■ Well Integrity	
Subsequent Report	□ Casing Repair	□ New	□ New Construction □ R		lete	⊠ Other	
☐ Final Abandonment Notice	☐ Change Plans	Plug	☐ Plug and Abandon ☐ Temp		arily Abandon	Drilling Operations	
	□ Convert to Injection	☐ Plug	Back	■ Water D	isposal		
Attach the Bond under which the work following completion of the involved testing has been completed. Final Abadetermined that the site is ready for final 10-22-17 Test csg to 7500# final 12-11-2017 to 12-18-17 Perf Bone Spring @ 12775734# total fluid. 12-19-17 Drill out plugs. CO to 12-20-17 Flowback well. 12-21-17 Shut well in. 12-24-17 RIH w/ 2-7/8" tbg, Gl	operations. If the operation re andonment Notices must be fil hal inspection. for 30 mins ok. Ran CBL 10049-14828'. 1040 ho o PBTD: 14832'. LV, & pkr & set @ 10043	sults in a multipled only after all r - TOC @ 350 les, .38. Frac	e completion or recrequirements, inclu 00'. SWI. w/ 238449 bbls	completion in a n ding reclamation	ew interval, a Form 316	0-4 must be filed once nd the operator has SERVATION ISTRICT 3 2018	
14. I hereby certify that the foregoing is to Name (Printed/Typed) TERRI STA	For CIMAREX Committed to AFMSS for	408517 verifie ENERGY COM processing b			System 0/2018 () ATORY COMPLIAN	JGE	
TENTO I			Tara da	7		7	
Signature (Electronic St	ubmission)		Date 03/20/	FRIED F	UKIRECORD		
	THIS SPACE FO	OR FEDERA	L OR STATE	OFFICE US	E /	1 /	
Approved By			Title	MARZ	400	Dale	

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department of agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED **