## **UNITED STATES** DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD Hobbs

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

5.	Lease Serial No.	
	NMNM3622	

B	5. Lease Serial No.					
SUNDRY Do not use thi	NMNM3622					
SUNDRY Do not use thi abandoned wel	6. If Indian, Allottee or Tribe Name					
SUBMIT IN 1	7. If Unit or CA/Agree	ement, Name and/or No.				
Type of Well     ☐ Gas Well ☐ Oth	DEC	7. If Unit or CA/Agreement, Name and/or No.  8. Well Name and No. SCOUT 18 FEDERAL 004  9. API Well No.				
Name of Operator     CIMAREX ENERGY CO OF COMMANDER			9. API Well No. 30-025-37880			
3a. Address 600 N. MARIENFELD, SUITE MIDLAND, TX 79701	3b. Phone No. (include area code) Ph: 432-687-3033			10. Field and Pool or Exploratory Area TONTO		
4. Location of Well (Footage, Sec., T	)			11. County or Parish,	State	
Sec 18 T19S R34E NWSE 17			LEA COUNTY, NM			
12. CHECK THE AI	PPROPRIATE BOX(ES)	TO INDICA	TE NATURE O	F NOTICE,	REPORT, OR OTH	HER DATA
TYPE OF SUBMISSION TYPE OF ACTION						
D Nation of Latent	□ Acidize		☐ Deepen		ion (Start/Resume)	☐ Water Shut-Off
□ Notice of Intent □ Alter Casing		☐ Hydraulic Fracturing		□ Reclam	ation	■ Well Integrity
equent Report	Casing Repair	Repair		☐ Recomp	olete	☐ Other
☐ Final Abandonment Notice ☐ Change Plans ☐ Convert to Injection		(Carl	and Abandon	Tempoi	rarily Abandon	
		☐ Plug Back ☐ Water		Disposal		
following completion of the involved testing has been completed. Final Al determined that the site is ready for f 09/20/17: SET 5-1/2" CIBP @ 09/21/17: DID NOT TAG CM PRES. TEST CSG. TO 1,000: 3.331'(OK'D BY BLM); PUMP	pandonment Notices must be fil inal inspection.  3,700'; CIRC. WELL; PU X PAGGED CIBP LOW. # - HELD OK; CIRC. WEL	ed only after all  MP 60 SXS.( SET 5-1/2" ( L: PUMP 60	requirements, included the control of the control o	ling reclamatio	n, have been completed a	0-4 must be filed once and the operator has
	PLATE TO CSGS. X INSTA ACCEPTED FOR RECORD					
DEOLAN	CLAMAT	ION	orn 1	4 2018		
RECLAMATION PROCEDURE			DUE 3.22-18 Reclaimed		SEP 1	4 2018
	ATTACHED	P	ala'med	<u>)</u> .	400	ne de
14. I hereby certify that the foregoing is	true and correct	1/6	C147177—		BUREALL OF LAN CARLSBAD F	
14. Thoroby borniy and the foregoing is	Electronic Submission # For CIMAREX EN	390265 verifie	d by the BLM We	il Information	n System	7220 011700
N (D: 1/7 1) DAN(DA)						
Name (Printed/Typed) DAVID A	Title AGENT	<u></u>				
Signature (Electronic Submission)			Date 09/28/2	017		
	THIS SPACE FO	R FEDERA	L OR STATE	OFFICE U	SE	
Approved By	Title	<u>.                                      </u>		Date		
Conditions of approval, if any, are attache certify that the applicant holds legal or equ which would entitle the applicant to condu	Office					
Title 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent					ake to any department or	agency of the United