

5215 N. O'Connor Blvd.
Suite 1500
Irving, TX 75039
972-401-3111 (phone)
972-443-6486 (fax)

RECEIVED

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Cimarex Energy Co. of Colorado PM 1 28

June 27, 2008

New Mexico Oil Conservation Division
1301 West Grand Avenue
Artesia, NM 88210
Attn: Ms. Kimberly Wilson

RE: Homer State Com No. 1
30-015-35559
Eddy County, NM
Form C-103 – Subsequent Report of DHC

DHC-3941

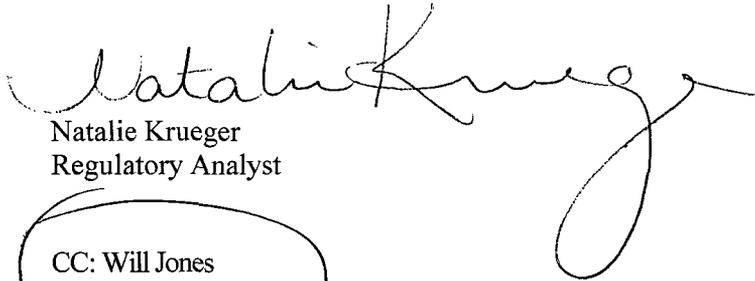
Dear Ms. Wilson,

Enclosed, please find a C-103 Subsequent Report of DHC of this well including percentages. We apologize for the lateness.

If you have any questions or need further information, please me at 469-420-2723.

Thanks for your time and have a good day!

Sincerely,


Natalie Krueger
Regulatory Analyst

CC: Will Jones
Sante Fe OCD

nkrueger@cimarex.com
.....

Submit 3 Copies To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 88240
 District II
 1301 W. Grand Ave., Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 May 27, 2004

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

| |
|---|
| WELL API NO. 30-015-35559 |
| 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No. |
| 7. Lease Name or Unit Agreement Name Homer State Com |
| 8. Well Number 001 |
| 9. OGRID Number 162683 |
| 10. Pool name or Wildcat Chosa Draw; Morrow & Revelation; Atoka |

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.)
 1. Type of Well: Oil Well Gas Well Other

2. Name of Operator
Cimarex Energy Co. of Colorado

3. Address of Operator
PO Box 140907; Irving, TX 75014-0907

4. Well Location
 SHL Unit Letter C : 660 feet from the North line and 1980 feet from the West line
 Section 2 Township 25S Range 25E NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
 3601' GR

Pit or Below-grade Tank Application or Closure
 Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____
 Pit Liner Thickness: _____ Below-Grade Tank: Volume _____ bbls; Construction Material _____

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"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | COMMENCE DRILLING OPNS <input type="checkbox"/> | P AND A <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | MULTIPLE COMPL <input type="checkbox"/> | CASING/CEMENT JOB <input type="checkbox"/> | |
| OTHER: <input type="checkbox"/> | | OTHER: <input type="checkbox"/> | DHC <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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

After flow-testing Atoka and Morrow zones with CBP @ 11010' separating them, the following well tests were acquired:

| Zone | Date Tested | Oil | Gas | Water |
|--------|-------------|-----|------|-------|
| Morrow | 08-31-07 | 0 | 932 | 31 |
| Atoka | 09-20-07 | 0 | 2797 | 22 |

On 09-29-07, the CBP was drilled out and the well was DHC per OCD Order DHC-3941. Cimarex would like to use the following percentages for the split:

| Zone | Oil | Gas | Water |
|--------|-----|-----|-------|
| Morrow | 0% | 25% | 59% |
| Atoka | 0% | 75% | 41% |

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan .

SIGNATURE Natalie Krueger TITLE Reg Analyst DATE June 27, 2008

Type or print name Natalie Krueger email address: nkrueger@cimarex.com Telephone No. 469-420-2723

For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any): _____