

Submit 1 Copy To Appropriate District Office  
District I – (575) 393-6161  
1625 N French Dr , Hobbs, NM 88240  
District II – (575) 748-1283  
811 S. First St., Artesia, NM 88210  
District III – (505) 334-6178  
1000 Rio Brazos Rd , Aztec, NM 87410  
District IV – (505) 476-3460  
1220 S St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised August 1, 2011

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

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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 )		WELL API NO. 30-015-40229
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Cimarex Energy Co.		6. State Oil & Gas Lease No.
3. Address of Operator 600 N. Marienfeld, Ste. 600; Midland, TX 79701		7. Lease Name or Unit Agreement Name Illinois 6 Fee
4. Well Location Unit Letter <u>B</u> : <u>990</u> feet from the <u>North</u> line and <u>2310</u> feet from the <u>East</u> line Section <u>6</u> Township <u>19S</u> Range <u>26E</u> NMPM Eddy County		8. Well Number 3
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3390' GR		9. OGRID Number 215099
		10. Pool name or Wildcat Penasco Draw; SA Yeso Assoc

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: CHANGE LOCATION <input checked="" type="checkbox"/>		OTHER: <input 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Cimarex respectfully requests approval to change the location of the Illinois 6 Fee 3 well as follows:

Permitted Location	New Proposed Location
6-19S-26E	6-19S-26E
SHL 990 FNL & 2310 FEL	SHL 990 FNL & 1650 FEL

Please see attached revised plat

Spud Date:

Rig Release Date:



I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Paula Brunson TITLE Regulatory DATE 7-19-12

Type or print name Paula Brunson E-mail address: pbrunson@cimarex.com PHONE: 432-571-7848

**For State Use Only**

APPROVED BY: J.C. Shepard TITLE Geologist DATE 7/24/2012  
Conditions of Approval (if any):