Submit 3 Copies To Appropriate District	State of New Mexico	Form C-103
Office District I	Energy, Minerals and Natural Resources	May 27, 2004_
1625 N. French Dr., Hobbs, NM 88240		WELL API NO.
District II	OIL CONSERVATION DIVISION	30-015-38129
1301 W. Grand Ave., Artesia, NM 88210 <u>District III</u>	1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505	STATE FEE
<u>District IV</u> 1220 S. St. Francis Dr , Santa Fe, NM	Salita Fe, INVI 67303	6. State Oil & Gas Lease No.
87505		
SUNDRY NOTI	CES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
	SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	
DIFFERENT RESERVOIR USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		PONDHAWK 32 STATE
	Gas Well Other	8. Well Number
		007
2. Name of Operator		9. OGRID Number
Cimarex Energy Co. of Colorado		162683
3. Address of Operator		10. Pool name or Wildcat
600 N. Marienfeld, Ste. 600; Mid	dland, TX 79701	EMPIRE; GLORIETA-YESO
4. Well Location		
SHL Unit Letter N: 990	feet from the South line and 2235	_feet from theline
Section32 Township	16S Range 29E NMPM_	County Eddy
	11. Elevation (Show whether DR, RKB, RT, GR, etc.	
	3629 GR	
Pit or Below-grade Tank Application 🗌 o	r 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; Cor	struction Material
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
	^ ^	
NOTICE OF IN		SEQUENT REPORT OF:
PERFORM REMEDIAL WORK		
TEMPORARILY ABANDON [PULL OR ALTER CASING [		<del></del>
OTHER:	<del>-</del>	1 306
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 11031 For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.		
	pire on 9-2-12. Cimarex respectfully requests an	extension due to rig scheduling
1 1 2 2 + 1 2	ted, new expiration date 9-	1.24/2
/ 118 EXT AFA(/)	PA TRW EXPIRATION GOVE 7-	22015
V		_
		RECEIVED
		AUG <b>2 9</b> 2012
		NMOCD ARTES A
I have been a self-that it is Continued in	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	11 1' 6 - 2
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.		
(31.1. All)	closed according to NWOCD guidennes, a general per unit	or an (attached) afternative OCD-approved plan
SIGNATURE / STE / STE	TITLE Regulatory Admin A	ssistant DATE August 28, 2012
Type or print name Chloe Alexa	nder, email address: cdalexander@cimarex	c.com Telephone No. 432-620-1960
For State Use Only	OI	
	Manhod Landing	T 8/24/21/2
APPROVED BY: Le	TITLE PROJUCIS	DATE OF THE
Conditions of Approval (if any):	<i>'</i>	/ /