

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010**SUNDRY NOTICES AND REPORTS ON WELLS**  
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.*

<b>SUBMIT IN TRIPLICATE - Other instructions on reverse side.</b>		5. Lease Serial No. NMNM14124
1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		6. If Indian, Allottee or Tribe Name
2. Name of Operator CIMAREX ENERGY COMPANY		7. If Unit or CA/Agreement, Name and/or No.
Contact: PAULA BRUNSON E-Mail: pbrunson@cimarex.com		8. Well Name and No. MARQUARDT 1 PENN FEDERAL 003
3a. Address 600 N MARIENFELD STE 600 MIDLAND, TX 79701	3b. Phone No. (include area code) Ph: 432-571-7848	9. API Well No. 30-015-34788
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 1 T25S R26E 1780FSL 735FWL		10. Field and Pool, or Exploratory WHITE CITY; PENN (GAS)
		11. County or Parish, and State EDDY COUNTY, NM

## 12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleate horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleation in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

3/13/12. TIH. Set 5-1/2 in. CBP at 11050. Perf Strawn 10336-10392, 57 holes, 0.34 hole size.  
3/14/12 ? TIH w/ 2-3/8 tubing and packer. Set at 10297. Acidize w/ 3000 gals 7-1/2% NeFe HCL.  
3/15/12 ? Swab well.  
3/21/12 ? Swab well to PBTD @ 11050.  
4/11/12 ? Flow well to sales.

U2D 8/12/15  
Accepted for record  
NMOCD

NM OIL CONSERVATION  
ARTESIA DISTRICT

AUG 10 2015

RECEIVED

14. I hereby certify that the foregoing is true and correct.		Electronic Submission #304111 verified by the BLM Well Information System For CIMAREX ENERGY COMPANY, sent to the Carlsbad Committed to AFMSS for processing by DEBORAH HAM on 06/16/2015	
Name (Printed/Typed) PAULA BRUNSON	Title REGULATORY ANALYST	<b>ACCEPTED FOR RECORD</b> AUG 3 2015 BUREAU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE	
Signature (Electronic Submission)	Date 06/05/2015		
THIS SPACE FOR FEDERAL OR STATE OFFICE USE			
Approved By _____		Title _____	
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.		Office _____	
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 or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.			

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