Form 3160-5 (June 2015)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

Artesia

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

5. Lease Serial No.

SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an

NMNM0560353

abandoned well. Use form 3160-3 (APD) for such proposals.					6. If Indian, Allottee or Tribe Name		
SUBMIT IN TRIPLICATE - Other instructions on page 2					7. If Unit or CA/Agree	ement, Name and/or No.	
1. Type of Well ☐ Gas Well ☐ Other					8. Well Name and No. CRESCENT HALE 11 FEDERAL 1		
Name of Operator Contact: AMITHY CRAWFORD CIMAREX ENERGY COMPANY OF CO-Mail: acrawford@cimarex.com					9. API Well No. 30-015-38494-00-S1		
3a. Address 202 S CHEYENNE AVE SUIT TULSA, OK 74103.4346		3b. Phone No. (include area code) Ph: 432.620.1909			10. Field and Pool or Exploratory Area BENSON-BONE SPRING		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)					11. County or Parish, State		
Sec 11 T19S R30E NENE 345FNL 545FEL					EDDY COUNTY, NM		
12. CHECK THE AF	PPROPRIATE BOX(ES)	TO INDICAT	E NATURE O	F NOTICE,	REPORT, OR OTH	IER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION						
☐ Notice of Intent	☐ Acidize ☐ I] Deepen		ion (Start/Resume)	■ Water Shut-Off	
☐ Alter Casing		☐ Hydraulic Fracturing		□ Reclam	ation	■ Well Integrity	
Subsequent Report	☐ Casing Repair	□ New	Construction	☐ Recomplete			·-i
☐ Final Abandonment Notice	☐ Change Plans	Plug :	☐ Plug and Abandon		arily Abandon	ng	111
	☐ Convert to Injection	☐ Plug	☐ Plug Back		Disposal		
Attach the Bond under which the wor following completion of the involved testing has been completed. Final Ab determined that the site is ready for fi Cimarex flared the volume of §	operations. If the operation re pandonment Notices must be fil inal inspection.	sults in a multiple led only after all re	completion or reco equirements, includ	mpletion in a ring reclamation	new interval, a Form 316 n, have been completed a	0-4 must be filed once and the operator has	
			419	/\{\/	L CONSERVATION RTESIA DISTRICT UG 09 2017 ECEIVED	ON:	
14. 1 hereby certify that the foregoing is	true and correct. Electronic Submission # For CIMAREX ENE mitted to AFMSS for proce	ERGY COMPAN	Y OF CO, sent/to	o the Carlsb	ad / 🚶		
Name (Printed/Typed) AMITHY C	•	1		ATORY AN	ALYST//	\mathcal{A}	
•			/A	COEPTE	D FØR RECO	KU	
Signature (Electronic S			Date 07/13/20		1/ /		
	THIS SPACE FO	OR FEDERAL	OR STATE	OFFICE,U	SE 0 2017	halx	
				/ 	/ X /		
Approved By			Title		X > 1/W	Date	
Conditions of approval, if any, are attached certify that the applicant holds legal or equivalent would entitle the applicant to conduct the conduction of t		Office	BUREAU O CARLS	FIAND MANAGEMEN BAD FIELD OFFICE			
Title 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent s				willfully to ma	ake to any department or	agency of the United	
(Instructions on page 2) ** BLM REV	ISED ** BLM REVISEI	D ** BLM RE	VISED **/BLN	REVISE	** BLM REVISE	D ** \	