

District I  
1625 N. French Dr., Hobbs, NM 88240

State of New Mexico  
Energy, Minerals & Natural Resources

Form C-104  
Revised August 1, 2011

District II  
811 S. First St., Artesia, NM 88210

Oil Conservation Division  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Submit one copy to appropriate District Office

District III  
1000 Rio Brazos Rd., Aztec, NM 87410

AMENDED REPORT

District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

<sup>1</sup> Operator name and Address Cimarex Energy Co. 202 S Cheyenne Ave., Ste 1000 Tulsa, OK 74103		<sup>2</sup> OGRID Number 215099
		<sup>3</sup> Reason for Filing Code/ Effective Date NW - 1-18-18
<sup>4</sup> API Number 30 - 015-44220	<sup>5</sup> Pool Name Purple Sage Wolfcamp Gas	<sup>6</sup> Pool Code 98220
<sup>7</sup> Property Code 317791	<sup>8</sup> Property Name DaVinci 7-18 Federal Com	<sup>9</sup> Well Number 6H

II. <sup>10</sup> Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
M 7	6	25S	27E		350	SOUTH	1190	WEST	EDDY

<sup>11</sup> Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
M 4	18	25S	27E		330	NORTH <i>South</i>	374	WEST	EDDY

<sup>12</sup> Lse Code	<sup>13</sup> Producing Method Code	<sup>14</sup> Gas Connection Date	<sup>15</sup> C-129 Permit Number	<sup>16</sup> C-129 Effective Date	<sup>17</sup> C-129 Expiration Date
F	P	1-18-18			

III. Oil and Gas Transporters

<sup>18</sup> Transporter OGRID	<sup>19</sup> Transporter Name and Address	<sup>20</sup> O/G/W
21778	Sunoco Inc. R & M PO Box 2039; Tulsa OK	
226737	DCP Midstream 370 17 <sup>th</sup> St, Ste 2500; Denver CO	
NM OIL CONSERVATION ARTESIA DISTRICT FEB 27 2018		
RECEIVED		

IV. Well Completion Data

<sup>21</sup> Spud Date	<sup>22</sup> Ready Date	<sup>23</sup> TD	<sup>24</sup> PBTB	<sup>25</sup> Perforations	<sup>26</sup> DHC, MC
10-12-17	1-12-18	18854/10655	18765	9162-18760'	
<sup>27</sup> Hole Size	<sup>28</sup> Casing & Tubing Size	<sup>29</sup> Depth Set	<sup>30</sup> Sacks Cement		
17.5	13.375	435	831 - TOC 0'		
12.25	9.625	1998	840 - TOC 0'		
8.75	7	8830	775 - TOC 0'		
6	4.5	7206-18854	775 - TOC @ 7206'		

V. Well Test Data

<sup>31</sup> Date New Oil	<sup>32</sup> Gas Delivery Date	<sup>33</sup> Test Date	<sup>34</sup> Test Length	<sup>35</sup> Tbg. Pressure	<sup>36</sup> Csg. Pressure
1-27-18	1-24-18	2-1-18	24	1168	657
<sup>37</sup> Choke Size	<sup>38</sup> Oil	<sup>39</sup> Water	<sup>40</sup> Gas	<sup>41</sup> Test Method	
24/64	360	5091	987		

<sup>42</sup> I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Signature: <i>Terri Stathem</i>	OIL CONSERVATION DIVISION
Printed name: Terri Stathem	Approved by: <i>Rusty Klein</i>
Title: Regulatory	Title: <i>Business Ops Spec A</i>
E-mail Address: <a href="mailto:tstathem@cimarex.com">tstathem@cimarex.com</a>	Approval Date: <i>2-28-2018</i>
Date: 02-23-18	Phone: 432-620-1936

Pending BLM approvals will subsequently be reviewed and scanned

27 JUL 2018

Form 3160-4  
(August 2007)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB No. 1004-0137  
Expires: July 31, 2010

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

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5. Lease Serial No.  
NMNM92167

1a. Type of Well  Oil Well  Gas Well  Dry  Other

b. Type of Completion  New Well  Work Over  Deepen  Plug Back  Diff. Resvr.  
Other \_\_\_\_\_

2. Name of Operator **CIMAREX ENERGY COMPANY** Contact: **TERRI STATHEM**  
E-Mail: **tstathem@cimarex.com**

3. Address **202 S CHEYENNE AVE., STE. 1000 TULSA, OK 74103** 3a. Phone No. (include area code) **Ph: 432-620-1936**

4. Location of Well (Report location clearly and in accordance with Federal requirements)\*  
At surface **SWSW Lot 7 350FSL 1190FWL**  
At top prod interval reported below **SWSW Lot 7 350FSL 1190FWL**  
At total depth **SWSW Lot 7 350FSL 1190FWL**

6. If Indian, Allottee or Tribe Name \_\_\_\_\_

7. Unit or CA Agreement Name and No. \_\_\_\_\_

8. Lease Name and Well No. **DA VINCI 7-18 FEDERAL COM 6H**

9. API Well No. **30-015-44220**

10. Field and Pool, or Exploratory **PURPLE SAGE WOLFCAMP GAS**

11. Sec., T., R., M., or Block and Survey or Area **Sec 6 T25S R27E Mer**

12. County or Parish **EDDY** 13. State **NM**

14. Date Spudded **10/12/2017** 15. Date T.D. Reached **11/05/2017** 16. Date Completed  D & A  Ready to Prod. **01/12/2018**

17. Elevations (DF, KB, RT, GL)\* **3281 GL**

18. Total Depth: **MD 18854 TVD 10655** 19. Plug Back T.D.: **MD 18765 TVD** 20. Depth Bridge Plug Set: **MD TVD**

21. Type Electric & Other Mechanical Logs Run (Submit copy of each) **NONE**

22. Was well cored?  No  Yes (Submit analysis)  
Was DST run?  No  Yes (Submit analysis)  
Directional Survey?  No  Yes (Submit analysis)

23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sk. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
17.500	13.375 J55	48.0	0	435		831		0	0
12.250	9.625 J55	36.0	0	1998		840		0	0
8.750	7.000 L80	32.0	0	8830		775		0	0
6.000	4.500 P110	11.6	7206	18854		775		7206	0

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
3.500	7182	7182						

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) WOLFCAMP	9162	18760	9162 TO 18760	0.380	1610	OPEN
B)						
C)						
D)						

26. Perforation Record

27. Acid, Fracture, Treatment, Cement Squeeze, Etc.

Depth Interval	Amount and Type of Material
9162 TO 18760	448868 BBLs TOTAL FLUID; 22559015# SAND.

28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
01/27/2018	02/01/2018	24	→	360.0	987.0	5091.0			GAS LIFT
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
24	1168	657.0	→	360	987	5091	2741	PGW	

28a. Production - Interval B

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
			→						

Pending BLM approvals will subsequently be reviewed and scanned

*Handwritten signature*



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

**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.*

5. Lease Serial No.  
NMNM92167

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

**SUBMIT IN TRIPLICATE - Other instructions on page 2**

1. Type of Well  
 Oil Well  Gas Well  Other

8. Well Name and No.  
DA VINCI 7-18 FEDERAL COM 6H

2. Name of Operator  
CIMAREX ENERGY COMPANY  
Contact: TERRI STATHEM  
E-Mail: tstatthem@cimarex.com

9. API Well No.  
30-015-44220

3a. Address  
202 S CHEYENNE AVE  
TULSA, OK 74103

3b. Phone No. (include area code)  
Ph: 432-620-1936

10. Field and Pool or Exploratory Area  
PURPLE SAGE WOLFCAMP GAS

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec 6 T25S R27E SWSW 350FSL 1190FWL

11. County or Parish, State  
EDDY COUNTY, NM

12. CHECK THE 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"/> Hydraulic Fracturing	<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 type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Drilling Operations
	<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 recompleat 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 must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

12-15-17 Test csg to 9100# for 30 mins ok.  
12-15-17to  
01-07-18 Perf Wolfcamp @ 9162-18760'. 1610 holes, 38. Frac w/ 448868 bbls total fluid, 22559015# sand.  
01-08-18 to  
01-10-18 Drill out plugs. CO to PBTD: 18765'.  
01-12-18 Flowback well.  
01-14-18 Shut well in.  
01-18-18 RIH w/ 3-1/2" tbg, GLV, & pkr & set @ 7182'. Turn well to production.

**NM OIL CONSERVATION**  
ARTESIA DISTRICT  
FEB 27 2018  
RECEIVED

14. I hereby certify that the foregoing is true and correct.  
**Electronic Submission #405601 verified by the BLM Well Information System For CIMAREX ENERGY COMPANY, sent to the Carlsbad**  
Name (Printed/Typed) TERRI STATHEM  
Signature (Electronic Submission)

Title MANAGER REGULATORY COMPLIANCE  
Date 02/23/2018

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By \_\_\_\_\_  
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.

Title \_\_\_\_\_  
Office \_\_\_\_\_

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Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly to state any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

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

**Additional data for EC transaction #405601 that would not fit on the form**

**32. Additional remarks, continued**