

Submit 3 Copies To Appropriate District Office  
 District I  
 1625 N French Dr., Hobbs, NM 88240  
 District II  
 1301 W Grand Ave., Artesia, NM 88210  
 District III  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

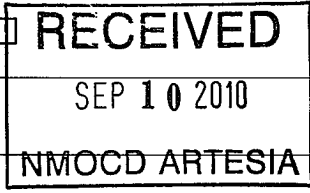
Form C-103  
 May 27, 2004

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

WELL API NO. 30-015-37633
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Darner 9 State
8. Well Number 001
9. OGRID Number 162683
10. Pool name or Wildcat GJ-7Riv-Qn-GB-Glor-Yeso

SUNDRY NOTICES AND REPORTS ON WELLS  
 (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.)

1. Type of Well: Oil Well  Gas Well  Other



2. Name of Operator  
Cimarex Energy Co. of Colorado

3. Address of Operator  
600 N. Marienfeld, Ste. 600; Midland, TX 79701

4. Well Location  
 SHL Unit Letter M : 330 feet from the South line and 810 feet from the West line  
 Section 9 Township 17S Range 29E NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3588' GR

Pit or Below-grade Tank Application  or 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; Construction Material \_\_\_\_\_

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
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 checked="" type="checkbox"/>	OTHER: <input type="checkbox"/>
OTHER: <input 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

- 04-15-10 Spud 14 3/4" hole. Ran 11 3/4" 42# H-40 STC casing to 430.' Cemented with Lead 1 100 sx RFC-H (wt 13.4, yld 1.62) and Lead 2 150 sx C + + 4% D-20 + 2% S-1 + 0.2% D-46 + 0.125# D-130 (wt 12.9, yld 1.97) and Tail 200 sx C + 1% S-1 (wt 14.8, yld 1.34).
- 04-16-10 TS TOC 120.' One-inched to 110' w/ 75 sx C + 3% CaCl<sub>2</sub>. Tagged @ 95.' One-inched to 95 w/ 75 sx C + 3% CaCl<sub>2</sub>. Circulated 43 sx to surface. WOC 14.5 hours. Pressure-tested casing to 500 psi for 30 minutes.
- 04-18-10 In 11" hole, ran 8 5/8" 24# K-55 STC to 1250.' Cemented with Lead 143 bbl 50/50 POZ C + 5% D-44 bwow + 10% D-20 + 0.2% D-46 + 3# D-42 + 0.125# D-130 + 1.5% D-112 (wt 11.8, yld 2.59) and Tail 83 bbl C + 0.1% D-13 (wt 14.8, yld 1.33). Circulated 163 sx to surface. WOC 12 hours. Pressure-tested casing to 1000 psi for 30 minutes.
- 04-23-10 TD'd 7 7/8" hole - 5118.'
- 04-25-10 Ran 5 1/2" 17# P-110 LTC to 5118.' Cemented with Lead 330 sx 35/65 POZ C + 5% D-44 bwow + 6% D-20 + 0.2% D-46 + 1% D-112 + 3# D-42 + 0.125# D-130 (wt 12.4, yld 2.27) and Tail 300 sx PVL + 1.3% D-44 bwow + 0.2% D-167 + 0.2% D-46 + 0.3% D-13 (wt 13, yld 1.41). Circulated 57 sx to surface. Pressure-tested casing to 3000 psi for 30 minutes. Released rig.

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 .

SIGNATURE Natalie Krueger TITLE Regulatory Analyst DATE September 5, 2010  
 Type or print name Natalie Krueger email address: nkrueger@cimarex.com Telephone No. 432-620-1936

For State Use Only  
 APPROVED BY: David Gray TITLE Compliance Officer-A DATE 9-10-10  
 Conditions of Approval (if any): Colt