

District I
1625 N. French Dr., Hobbs, NM 88240
Phone:(505) 393-6161 Fax:(505) 393-0720

District II
1301 W. Grand Ave., Artesia, NM 88210
Phone:(505) 748-1283 Fax:(505) 748-9720

District III
1000 Rio Brazos Rd., Aztec, NM 87410
Phone:(505) 334-6178 Fax:(505) 334-6170

District IV
1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico
Energy, Minerals and Natural Resources
Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

Form C-103
Permit 125923

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVIOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NUMBER 30-015-37989
1. Type of Well: O		5. Indicate Type of Lease S
2. Name of Operator CIMAREX ENERGY CO. OF COLORADO		6. State Oil & Gas Lease No.
3. Address of Operator 600 N. Marienfeld St, Suite 600, Midland, TX 79701		7. Lease Name or Unit Agreement Name CHASER 8 STATE
4. Well Location Unit Letter <u>B</u> : <u>990</u> feet from the <u>N</u> line and <u>2310</u> feet from the <u>E</u> line Section <u>8</u> Township <u>17S</u> Range <u>29E</u> NMPM <u>Eddy</u> County		8. Well Number 005
11. Elevation (Show whether DR, KB, BT, GR, etc.) 3634 GR.		9. OGRID Number 162683
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: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
 TEMPORARILY ABANDON ☐ CHANGE OF PLANS ☐
 PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
 Other:

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTER CASING ☐
 COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDON ☐
 CASING/CEMENT JOB ☐
 Other: **Drilling/Cement** ☒

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.
 11-30-10 Spud 16" hole. Ran 11-3/4" 42# H40 STC @ 425. Cmt w/ lead 175 sx C, tail 200 sx C, circ 46 sx, WOC 19 hrs. 12-1-10 Test csg to 1400# for 30 min, ok. 12-2-10 In 11" hole, ran 8-5/8" 24# J55 STC @ 1122. Cmt w/ lead 200 sx 50/50 POZC, tail 300 sx C, circ 135 sx, WOC 15 hrs, test csg to 2000# for 30 min, ok. 12-7-10 TD 7-7/8" hole @ 5288. 12-8-10 Ran 5-1/2" 17# N80 LTC @ 5288. Cmt w/ lead 35/65 POZC, tail 250 sx PVL, circ 72 sx. RR. 1-9-10 Test csg 3000# for 30 min, ok. CBL TOC 50'. 11/30/2010 Spudded well.

Casing and Cement Program

Date	String	Fluid Type	Hole Size	Csg Size	Weight lb/ft	Grade	Est TOC	Dpth Set	Sacks	Yield	Class	1" Dpth	Pres Held	Pres Open Drop	Open Hole
11/30/10	Surf	FreshWater	16	11.75	42	H40	0	425	375		C				
12/02/10	Int1	Brine	11	8.625	24	J55	0	1122	500		POZC/C				
12/08/10	Prod	CutBrine	7.875	5.5	17	N80	50	5288	675		POZC/PVL				

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 Electronically Signed _____ TITLE Manager Operations Administration DATE 1/18/2011
 Type or print name Zeno Farris E-mail address zfarris@cimarex.com Telephone No. 432-620-1936

For State Use Only:

APPROVED BY: Randy Dade TITLE District Supervisor DATE 1/18/2011 8:18:49 AM