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 126476

WELL API NUMBER
30-015-37999

5. Indicate Type of Lease
S

6. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFRENT RESERVIOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

7. Lease Name or Unit Agreement Name
SPIKETAIL 5 STATE

1. Type of Well: O

8. Well Number
002

2. Name of Operator
CIMAREX ENERGY CO. OF COLORADO

9. OGRID Number
162683

3. Address of Operator
600 N. Marienfeld St, Suite 600, Midland, TX 79701

10. Pool name or Wildcat

4. Well Location
Unit Letter K : 2160 feet from the S line and 1650 feet from the W line
Section 5 Township 17S Range 29E NMPM Eddy County

11. Elevation (Show whether DR, KB, BT, GR, etc.)
3644 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:_____ 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:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTER CASING ☐
TEMPORARILY ABANDON ☐	CHANGE OF PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDON ☐
PULL OR ALTER CASING ☐	MULTIPLE COMPL ☐	CASING/CEMENT JOB ☐	
Other:		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.

8-15-10 Spud 16" hole. Ran 9 jts 11 3/4" 42# H40 STC @ 450. 8-16-10 Cmt w/ lead 200 sx C, tail 200 sx C, circ 86 sx, WOC 17.25 hrs, test to 1000# for 30 min, ok. 8-17-10 In 11" hole, ran 24 jts 8 5/8" 24# J55 STC @ 1095. Cmt w/ lead 200 sx 50/50 POZC, tail 300 sx C, circ 120 sx, WOC 16.25 hrs. 8-18-10 Test to 1500# for 30 min, ok. 8-22-10 TD 7 7/8" hole @ 5308. 8-23-10 Ran 141 jts 5 1/2" 17# P110 LTC @ 5303. Cmt w/ lead 430 sx 35/65 POZC, tail 250 sx PVL, circ 79 sx. RR. 9-3-10 Test to 1500# for 30 min, ok.**8/15/2010** 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 Drop	Open Hole
08/15/10	Surf	FreshWater	16	11.75	42	H40	0	450	400		C				
08/17/10	Int1	Brine	11	8.625	24	J55	0	1095	500		POZC/C				
08/23/10	Prod	CutBrine	7.875	5.5	17	P110	0	5303	680		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 1/29/2011

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 1/31/2011 10:11:34 AM