

UNITED STATES
DEPARTMENT OF THE INTERIOR **OCD-ARTESIA**
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO 1004-0135
Expires January 31, 2004**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.****SUBMIT IN TRIPLICATE - Other instructions on reverse side**

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

CIMAREX ENERGY CO. OF COLORADO ATTN: ZENO FARRIS

3a. Address

600 N. MARIENFELD, SUITE 600, MIDLAND, TEXAS 79701

3b. Phone No. (include area code)

(432) 571-7800

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

UNIT LETTER H

1980' ENL & 760' FEL

SECTION 17, T-18S, R-31E

5. Lease Serial No.

LC 029393-C

6. If Indian, Allottee or Tribe Name

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

NMNB4597

8. Well Name and No

NORTH SHUGART #001

FEDERAL

9. API Well No.

30-015-26374

10. Field and Pool, or Exploratory Area

NORTH SHUGART (MORROW)

11. County or Parish, State

EDDY COUNTY

NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐
- Notice of Intent
-
- ☒
- Subsequent Report
-
- ☐
- Final Abandonment Notice

TYPE OF ACTION

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Fracture Treat | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Change Plans | <input checked="" 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 shall 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 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the final site is ready for final inspection.)

01/30/12: JET CUT 2-3/8" TBG. @ 11,488' (OK'D BY BLM).

01/31/12: SET 4-1/2" CIBP @ 11,485'; CIRC. WELL W/ PXA FLUID.

02/01/12: MIX X PUMP A 25 SX. CMT. PLUG ON TOP OF CIBP @ 11,485'-11,235' (CALC.); MIX X PUMP A 25 SX. CMT. PLUG @ 10,090'; WOC.

02/03/12: TAG TOP OF CMT. PLUG @ 7,962' (OK'D BY BLM).

02/04/12: MIX X PUMP A 25 SX. CMT. PLUG @ 7,930'-7,750' (CALC.); MIX X PUMP A 25 SX. CMT. PLUG @ 5,825'-5,575' (CALC.); MIX X PUMP A 25 SX. CMT. PLUG @ 4,870'-4,620' (CALC.).

02/05/12: CUT X PULL 4-1/2" CSG. @ 4,077'.

02/06/12: MIX X PUMP A 45 SX. CMT. PLUG @ 4,136'; WOC.

02/07/12: TAG TOP OF CMT. PLUG @ 3,766'; MIX X PUMP A 60 SX. CMT. PLUG @ 3,673'-3,435' (CALC.); MIX X PUMP A 25 SX. CMT. PLUG @ 880'-780' (CALC.); MIX X PUMP A 25 SX. CMT. PLUG @ 442'-342' (CALC.); MIX X CIRC. TO SURF. A 25 SX. CMT. PLUG @ 100'-3'; DIG OUT X CUT OFF WELLHEAD 3' B.G.L.; WELD ON STEEL PLATE TO CASINGS X INSTALL GROUND LEVEL DRY HOLE MARKER.

WELL PLUGGED AND ABANDONED 02/07/12.

**RECLAMATION
DUE 8-5-12**Accepted as to plugging of the well bore.
Liability under bond is retained until
Surface restoration is completed.14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

DAVID A. EYLER

Title

AGENT

Date

02/08/12

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

FEB 15 2012

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.

Office

Title 18 U.S.C. Section 1001, and Title 43 U.S.C. Section 1212, makes it a crime for any person knowingly and willfully to make any false statement or to omit any material within its jurisdiction.

Accepted for record
NMOC

CARLSBAD FIELD OFFICE