BL	UNITED STATES PARTMENT OF THE D JREAU OF LAND MANA	NTERIOR GEMENT		NRTESI	A OMB NO	APPROVED 0. 1004-0135 July 31, 2010
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.				6. If Indian, Allottee or Tribe Name		
SUBMIT IN TRIPLICATE - Other instructions on reverse side.					7. If Unit or CA/Agreement, Name and/or No. NMNM91062	
 Type of Well Oil Well Gas Well Other 					8. Well Name and No. EDDY 21 FED COM 3	
2. Name of Operator CIMAREX ENERGY COMPANY OF CĐ-Mail: sarmstrong@cimarex.com					9. API Well No. 30-015-32635-00-S1	
202 S CHEYENNE AVE SUITE 1000 Ph: 918			e No. (include area code) -560-7275 749-8059		10. Field and Pool, or Exploratory WHITE CITY	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)					11. County or Parish,	and State
Sec 21 T24S R26E NWSW 1400FSL 860FWL				EDDY COUNTY, NM		Υ, NM
12. CHECK APPR	OPRIATE BOX(ES) TO) INDICATE N	ATURE OF 1	NOTICE, RI	EPORT, OR OTHEI	R DATA
TYPE OF SUBMISSION	TYPE OF ACTION					
Notice of Intent	Acidize	Deepen 🗇 Produ		🗇 Producti	on (Start/Resume)	□ Water Shut-Off
	Alter Casing	🖸 Fracture Treat 📋 R		🗖 Reclama	ation	Well Integrity
🛛 Subsequent Report	Casing Repair	□ New Construction □ Recon		🗖 Recomp	lete	☑ Other Site Facility Diagra
Final Abandonment Notice	andonment Notice Change Plans Plug and Abandon			_ remporarily Abandonm/Sec		
	□ Convert to Injection	· 🗖 Plug B	ack	U Water D	/ater Disposal	
13. Describe Proposed or Completed Ope If the proposal is to deepen directiona Attach the Bond under which the wor following completion of the involved testing has been completed. Final Ab determined that the site is ready for fi Please see the attached site d Correct well type to Gas.	Ily or recomplete horizontally, k will be performed or provide operations. If the operation re andonment Notices shall be fil nal inspection.)	give subsurface loc the Bond No. on fi sults in a multiple c	ations and measure le with BLM/BL ompletion or rec	ared and true ve A. Required sub ompletion in a r	rtical depths of all pertin sequent reports shall be ew interval, a Form 316	ent markers and zones. filed within 30 days 0-4 shall be filed once
concernen type to eas.			Acce	pted for R	ecord Purposes.	
		ONSERVAT	ាហ្វា	oval Suni	ert to Oneit. T	noodi.
			Date:		3/3/14	
	МАн	1 4 2016	<u></u>		the anno	7
	RE	CEIVED				
14. I hereby certify that the foregoing is	true and correct. Electronic Submission # For CIMAREX ENE Imitted to AFMSS for proc	ERGY COMPANY	OF CO. sent	to the Carlsb	adí	
Name (Printed/Typed) SHELI ARMSTRONG				LATORY AN		
Signature (Electronic S	ubmission)	Г	Date 02/15/2	2016		

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Signature	(Electronic Submission)	Date 02/15/2016	· · · · · · · · · · · · · · · · · · ·					
THIS SPACE FOR FEDERAL OR STATE OFFICE USE								
Approved By	, if any, are attached. Approval of this notice does not warrant or	Title	Date					
certify that the application	nt holds legal or equitable title to those rights in the subject lease e applicant to conduct operations thereon.	Office						
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.								

** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED **

