Submit One Copy To Appropriate District Office State of New Mexico	Form C-103
Submit One Copy To Appropriate District Office District 1 1625 N. French Dr., Hobbs NASS DISTRICT District II ARTESIA DISTRICT	Revised November 3, 2011 WELL API NO.
1625 N. French Dr., Hobbs MM SOLL CONSEINERS, WHITE ARTESIA DISTRICT District II OH: CONSEINER ARTESIA DIVISION	30-015-05666
District II 811 S. First St., Artesia, NM 88210 District III NOV 0 7 2 CHAPCONSERVATION DIVISION 1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	STATE FEE
District IV 1220 S. St. Francis Dr., Santa Fe, NM RECEIVED	6. State Oil & Gas Lease No.
87303	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH	MONTEREY B STATE
PROPOSALS.) 1. Type of Well: Coil Well Gas Well Other	8. Well Number 001
2. Name of Operator	9. OGRID Number
Cimarex Energy Co of Colorado	162683
3. Address of Operator	10. Pool name or Wildcat
202 S. Cheyenne Ave, Suite 1000, Tulsa OK 74103	SHUGART YATES, 7R-QN-GB
4. Well Location	
Unit Letter N : 600 feet from the S line and 1980 feet from the W line Section 32 Township 18S Range 31E NMPM County EDDY	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
3574 GR	
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 ALTERING CASING	
TEMPORARILY ABANDON	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMEN	T JOB 🔲
OTHER: Location is ready for OCD inspection after P&A	
All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan.	
Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned.	
A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the	
OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR	
UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR	
PERMANENTLY STAMPED ON THE MARKER'S SURFACE.	
The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and	
other production equipment.	
Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level.	
If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed	
from lease and well location.	
All metal bolts and other materials have been removed. Portable bases have been removed.	oved. (Poured onsite concrete bases do not have
to be removed.) All other environmental concerns have been addressed as per OCD rules.	
Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non-	
retrieved flow lines and pipelines.	
If this is a one-well lease or last remaining well on lease: all electrical service poles and lines have been removed from lease and well location, except for utility's distribution infrastructure.	
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When all work has been completed, return this form to the appropriate District office to schedule an inspection.	
SIGNATURE TITLE Regulatory Techni	cian DATE <u>11/02/2016</u>
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TYPE OR PRINT NAME Rhonda Sheldon E-MAIL: RSheldon@cim.	arex.com PHONE: 918-295-1709
APPROVED BY: flatt 1 Py TITLE COMPLIANCE OFHER DATE // //////////	
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