Form 3160-5 (June 2015)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMEŅT

OCD-AR	TESTA
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FORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018

	Expires:		
ease	Serial No.		

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.
abandoned well. Use form 3100-3 (APD) for such proposals.

6	If Indian	A Dottee	or Tribe Name

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 page 2				7. If Unit or CA/Agreement, Name and/or No.				
1. Type of Well ☐ Gas Well ☐ Other				8. Well Name and No. BONNIE 35 FEDERAL 1H				
2. Name of Operator Contact: HOPE KNAULS CIMAREX ENERGY COMPANY OF CO-Mail: kknauls@cimarex.com				9. API Well No. 30-015-42956-00-S1				
3a. Address 202 S CHEYENNE AVE SUITE 1000 TULSA, OK 74103.4346 3b. Phone No. Ph: 918.585			. (include a 5.1100	area code)		10. Field and Pool or Exploratory Area UNKNOWN WILDCAT		
4. Location of Well (Footage, Sec., T.	, R., M., or Survey Description,)			11. County or Parish, State			
Sec 35 T25S R26E SESE 200FSL 970FEL					EDDY COUNTY, NM			
12. CHECK THE AP	PROPRIATE BOX(ES)	TO INDICA	TE NAT	URE OF	NOTICE	, REPORT, OR OT	HER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION							
Notice of Intent	☐ Acidize	☐ Dee	pen		☐ Produc	tion (Start/Resume)	■ Water Shut-Off	
_	☐ Alter Casing	☐ Hyd	raulic Fra	acturing	☐ Reclan	nation	■ Well Integrity	
☐ Subsequent Report	☐ Casing Repair	□ Nev	/ Constru	ction	☐ Recom	plete	Other Site Facility Diagra	
☐ Final Abandonment Notice	☐ Change Plans	☐ Plug and Abandon ☐		-	orarily Abandon	m/Security Plan		
	Convert to Injection	Plug	g Back		Water	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	Illy or recomplete horizontally, k will be performed or provide operations. If the operation re andonment Notices must be fil	give subsurface the Bond No. or sults in a multipl	locations and file with le complete	and measure BLM/BIA. ion or recon	ed and true v Required st apletion in a	vertical depths of all pert ubsequent reports must be new interval, a Form 31	inent markers and zones. be filed within 30 days 160-4 must be filed once	
Please see attached Facility D	iagram.		•				•	
Accepted for reco	ord - NMOCD 4—11—17			Appro	val Subj	Record Purposes ject to Onsite In [29][7]		
14. I hereby certify that the foregoing is Com Name (Printed/Typed) HOPE KN.	# Electronic Submission For CIMAREX ENE mitted to AFMSS for proc	ERGY COMPA	NY OF CO	D, sent to PEREZ on	the Carlsi 03/08/2011	oad	OL CONSERVATION ARTESIA DISTRICT APR 1 0 2017	
		-						
Signature (Electronic S	ubmission)		Date	03/08/20	17		RECEIVED	
	THIS SPACE FO	OR FEDERA	L OR S	STATE C	FFICE L	JSE		
Approved By	Juel		Title	EP	s. W	E	3129/17 Date	
Conditions of approval, if any, are attached certify that the applicant holds legal or equ which would entitle the applicant to condu	itable title to those rights in the		Office	CFI	\mathcal{L}			

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.

